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THE CONQUEST OF NERVES

A Manual of Self-Help

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THE CONQUEST OF NERVES



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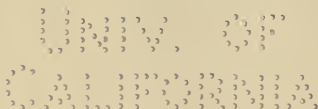
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THE CONQUEST OF NERVES

BY

J. W. COURTNEY, M. D.



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To My Wife

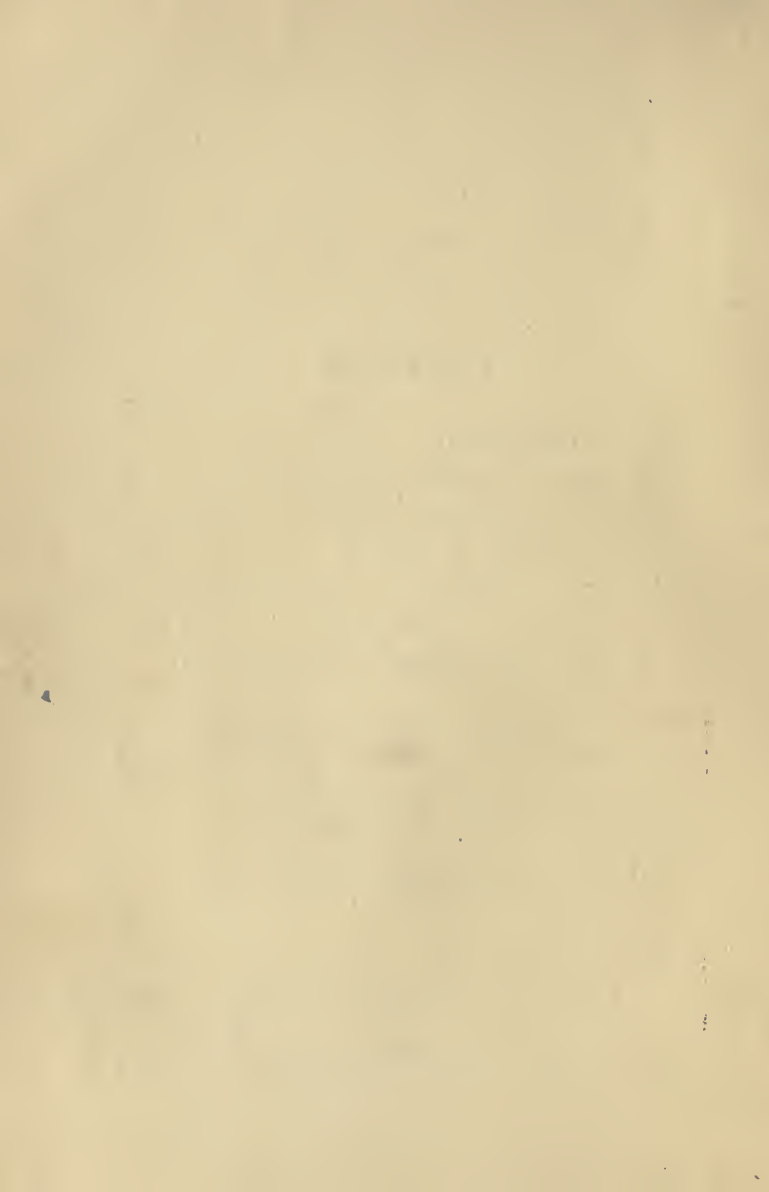
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THE CONQUEST OF NERVES

CHAPTER I

INTRODUCTORY

In view of the great advances that have been made in the fields of Science, Industry and Art within the last century, it is somewhat discouraging to the thoughtful physician to observe with what slowness even the most rudimentary knowledge of the human body and its functions is disseminated among otherwise enlightened peoples. Countless individuals, both men and women, attain to the highest distinction in vocations which require the keenest intelligence and the broadest cultivation, and yet remain as ignorant of the simplest bodily functions as the new-born is of its origin.

While health abounds such ignorance may be blissful; but health like riches, often has wings, and when it has taken

flight its former possessors, despite their astuteness and intelligence, are quite as apt as the commonest day laborer to be preyed upon by terror and superstition.

This unhappy state is most prone to appear when the nervous system, and particularly that part of it which is the seat of the feelings and emotions, becomes *functionally* deranged. It is then that terror reigns supreme, and the victim, unaided by knowledge of self, is as helpless before it as a rudderless ship is in the teeth of a gale.

The first recourse in such a plight is usually to the family doctor; but the desired relief is seldom obtained for various reasons, the weightiest of which is that the one consulted fails to perform his most important function—that of *teacher*.

The sufferer is told not once, but many times, that there is nothing organically wrong, and prescription after prescription for tonics and nervines is put into his hands. In short, everything is done for him except what is most essential for his cure.

It is no lasting comfort for him to know that his organs are sound. They may be as sound as the rock of Gibraltar, but so far as he personally is the judge, the weight of evidence is all to the contrary. His friends, and even members of his own family, are stricken with the grip, pneumonia, typhoid and like diseases, take medicine and recover; while he who, according to the repeated assurance of his medical adviser, has no disease whatsoever, faithfully swallows one drug after another, and yet goes, to his own seeming, from bad to worse, both mentally and physically.

After this paradoxical state of affairs has persisted for a longer or shorter space of time, he very naturally loses patience with the treatment he is receiving, forsakes orthodox methods altogether and starts out upon a search for the mythical "Royal Road to Health."

At this point he is almost certain either to yield to the lure of some patent medicine advertisement or take up with a religious-medical cult which offers to lead him unerringly along the road he is so anxious

to travel. If he chooses the "mind and soul" course, his vocabulary soon enlarges through taking in such amazing terms as: *autosuggestion, psychotherapy, psychotherapeutics, subliminal mind, subconscious mind* and others equally polysyllabic. And, at the same time he is very apt to become deluded with the notion that Mind is the master and that the body is its abject slave.

Now, the object of this modest little volume is to fulfil that most important teaching function which the busy doctor is, unfortunately, too often forced to neglect. Hence, it is the author's most earnest desire that it should come into the hands of individuals with "nerves," at that critical moment when, with faith in the curative power of orthodox Medical Science dead and that in themselves fast dying, they ordinarily fall into the first trap set for them by Quackery.

In these pages they will be taught the things that are vital to their recovery: that there is absolutely no royal road to health; that the return to nervous vigor is

mainly a matter of the grace of God and their own intelligently-directed endeavors; and that *psychotherapeutics* and *autosuggestion*, reduced to terms of common understanding, mean *self-discipline*, and have nothing whatsoever to do with some vague, subtle, curative force which can be injected into their equally vague *subconscious* or *subliminal* minds, either by a divinely-favored individual or by themselves. They will be taught, furthermore, that Mind is not the absolute master of the body, but that both are alike implicated in the disorder and demand the same attention; that whatever of real value there is in unorthodox methods is borrowed from Medical Science; and, finally, that they are in no wise called upon to do violence to their intelligence or—in plain English—to make downright fools of themselves, in the effort to be well.

In the main, the therapeutic (curative) measures advocated will be in accord with the doctrines of modern Medical Science, and where they are not they will still meet with its approval. They are essentially

simple, and to the benighted, who are constantly looking for a short and easy way out of their troubles, they will probably make no appeal. But to those who have the good sense to realize that the escape from the torment of "nerves" is mainly a matter of *self-help*, it is the author's fondest hope that they will prove of utmost service.

The term "nerves" is not intended to cover all the manifestations of disordered nervous activity, but simply those which, according to their grouping in a given case, are designated as neurasthenia, hysteria, neurosis and psychoneurosis. It may safely be assumed that in all four groups the underlying morbid condition of the nervous system is identical, and the sufferer, so far as treatment is concerned, may apply to his case whichever of the above imposing terms he sees fit.

It is said that a little knowledge is a dangerous thing, but the truth of this saying depends entirely upon the application one attempts to make of this little. A little knowledge of anatomy and physiology

often enables its possessor to save a life by applying a tourniquet to a bleeding limb or to restore to consciousness a person who has been rescued from drowning. In view of this fact it is entirely reasonable to conclude that a little preliminary knowledge of the nervous system and its functions will help the sufferer to a clearer understanding of his situation and, at the same time, qualify him to pursue with greater intelligence the curative measures that are later to be suggested.

Roughly speaking, the nervous system may be divided into the following component parts: The great brain or cerebrum which, with the little brain or cerebellum, occupies the major portion of the cavity of the skull; the spinal cord, which is contained within the central canal of the spinal column; and the nerves which ramify from the brain and cord in all directions through the head, neck, trunk, internal organs and extremities.

In health, these various component parts are in constant and intimate relationship, both structurally and functionally. The

great and the little brain are each made up of two hemispheres, which have both common and individual functions. In the rind or cortex of the great brain there lie embedded in a sort of cement tissue, great numbers of cells which represent either the points of origin or termination of nerves that go to or come from nearly every portion of the body and extremities, and in the same way, each nerve of special sense has its definite representation. The entire speech faculty is controlled by certain intimately connected areas which are situated in the cortex of the left hemisphere of the great brain in right-handed individuals, while in the left-handed they are found in a corresponding situation on the opposite side. Furthermore, the great brain, by means of nerve tracts which bind together its hemispheres, and by others which connect it with the little brain and spinal cord, is in constant and instant communication with each and every part of the entire body.

The nervous system is rightly termed the master-tissue of the body, for no corpo-

real function, no matter how insignificant, is possible without its intervention. From the elaboration of ideas which denote genius down to the secretion of the tiniest sweat-gland, there is no form of mental or physical activity wholly independent of its control.

For its power to perform all these complex and manifold functions, it, in turn, is dependent upon the quality and quantity of the blood that is constantly flowing through it. When, for example, a certain region of the brain is called into special functional activity, it immediately receives an increased supply of blood which, by automatic action, has been diverted from other and less active regions in order to supply the fuel for this activity and to repair the waste occasioned thereby.

In conditions of health, the balance between waste and repair is so nicely adjusted that the entire nervous system works as one harmonious whole. Through its activity the heart beats with vigor and regularity, sending the warm blood to the extremities; respiration is deep and full;

the digestive processes go on entirely below the level of consciousness; in every voluntary muscle there is a stored-up fund of potential energy; the mind is alert, the perceptions clear and the memory retentive.

As a result of this complete harmony and vigor of action, there arise in consciousness certain feelings, technically known as the *egoistic feelings*, which together make up the personality, the *ego*, of the individual. This fact is an important one to bear in mind, since it enables us to understand why the character is so frequently altered when harmony and vigor of nervous activity are replaced by discord and debility—in a word, when the nervous system becomes functionally deranged.

In such derangement, let it be clearly understood, there are never any demonstrable changes to be made out in the brain, spinal cord or nerves. Their fine adjustment is, however, temporarily destroyed and the result is a perfect riot of function, often a diabolic caricature of the normal, throughout the organism.

At this point the reader with "nerves" is asked to turn, with open mind, to the chapters immediately following, in which it is clearly shown that in all cases where people attribute their cure to Christian Science, Emmanuel, New Thought and other, even more unorthodox, forms of therapy, the disorder recovered from is, in every respect, identical with his own, and that recovery is invariably brought about through the agency of *self* alone.

If he is convinced of the truth of the facts there set forth, let him turn to the remaining chapters, where he will find what he needs to know of the nature and causes of his suffering, the origin and meaning of his symptoms and, finally, the ways and means by which he may return to health, without losing his own respect or that of his fellow men.

CHAPTER II

HOW CHRISTIAN SCIENCE CURES

Nature is often supremely indifferent to inductions based upon scientific research, and probably nowhere else is the truth of this disconcerting fact so commonly made manifest as in the practice of medicine. It is the every-day experience of every physician to encounter cases which, in their behavior, upset not only all his own preconceived notions concerning the course and outcome of certain diseases, but also all the laws on the subject, which have crystallized, so to speak, out of the great mass of medical experience in general.

Owing to this lack of dependability on the part of Nature, the treatment of disease is necessarily, in large measure, a matter of art, rather than of exact science; and this fact has, for centuries, held the

door of Therapy wide open to all forms of charlatanry.

Out of all that have in recent years crossed its threshold, the most curious, amazing, and in every way extraordinary, is Christian Science. It is not the purpose of this little volume to disclose the monstrous pretense of this so-called science, to cause the reader to shudder with horror at its sacrilegious usurpation of divine power, to excite a smile of contempt for its disregard of natural laws or to turn to ridicule the verbal scrapheap which constitutes its propaganda. That has already been done, both thoroughly and effectively, by other writers.

The present aim is to get beneath its thin surface veneer of religion and pseudoscience, and make manifest the solid underlying worldly wisdom that gives it whatever stability and power it possesses. This worldly wisdom of Christian Science has endless ramifications, but chief among the facts of which it makes practical use are these: (a) that the average human adult is as profoundly ignorant as a child

of the significance of the simplest bodily functions; (b) that bodily disorder often produces a mental reverberation more formidable than its cause; (c) that this mental reverberation, in the great majority of cases, assumes the form of fear, the most elemental and powerful of human emotions; (d) that reason is the bond-slave of fear; (e) that under the thrall of fear the mind is an easy prey to limitless credulity and superstition; and (f) that one line of thought, if sufficiently intense, can control all other lines of thought, feeling and activity.

It now remains to show how Christian Science, armed with these facts, sets to work to accomplish its "cures"—a somewhat lengthy story.

Regardless of what, in his ignorance, the individual cured by Christian Science says or thinks of his malady, it is, in every case, some one form of the functional disorders already mentioned. Furthermore, whenever the claim is made that not merely one but several diseases have been recovered from, this is an "error of mortal mind,"

and simply means that, through ignorance again, single symptoms have been exalted to the dignity of disease entities. This statement is based on a careful analysis of all the available cases in Christian Science literature.

Behind every patient, who has recourse to "Science," there is invariably a long record of woe. He (or usually she) has suffered many things of many men, both in the way of diagnosis and of treatment.

At the outset, her trouble—nervous dyspepsia, palpitation of the heart, numbness of an extremity or similar functional disorder—is called to the attention of the family physician, and is promptly pooh-poohed by him as a matter of no significance.

Relieved, for the time being, by the assurance of the trusted medical adviser, she continues to abuse the particular nervous function, no matter which, that uttered the first outcry of protest.

After a lapse of a few weeks or months, as the case may be, her symptoms return and usually in a manner sufficiently start-

ling and dramatic to make a vivid and lasting impression upon consciousness. The interval between the attacks arouses in her mind the suspicion that some subtle and insidious agency is at work, slowly but surely undermining her health.

Again she seeks the advice of the family physician, and this time insists upon a thorough examination. If her most troublesome symptom chances to be dyspepsia, she recalls that some relative—however remote—died of cancer of the stomach, and, further, that this relative's trouble began in a manner identical with her own. If her heart palpitates, she can't help thinking of somebody she once knew, who suffered that way for a long time and then died *suddenly* from heart (?) disease; and if she awakens mornings with a numbness of the ring and little fingers, it is just what somebody else (anywhere from forty to fifty years her senior) used to have just before he had his "stroke."

Her second visit to her physician affords her no more permanent relief than the

first. On the contrary, she is sure now that he either does not know what the matter is with her or that, in a mistaken spirit of kindness, he is withholding from her the hideous truth.

In her perplexity, she forsakes the family doctor, and surreptitiously consults a succession of medical men, to whom she is unknown, in the hope of obtaining the desired light on her *mysterious* ailment. One doctor hints darkly at obscure stomach and liver trouble, and prescribes nauseous compounds that produce a shiver of disgust as she swallows them; another, after applying the muck-rake to her ancestry, is certain that the whole disturbance is of a gouty nature, disapproves of the treatment she is then taking and maps out one of his own. A third disagrees absolutely with the first two, and traces all her trouble to an entirely different source.

By this time her perplexity and, incidentally, her symptoms have increased tenfold. Hope is not entirely dead, although the constant addition of some new and alarming symptom is slowly killing it.

Most of her waking hours, and these extend far into the night, are given over to introspection.

Next comes the visit to the specialist, often entailing an exhausting journey to a distant city—to say nothing of the expense. No result. Then a stay in a sanitarium, where, in her isolation, she does little but dissipate her scanty fund of energy in worry over her abandoned vocation or her household. Discontent drives her home again.

There is now abundant outward evidence of her suffering. Little streaks of gray are beginning to show in her hair; her face is pale and drawn; wrinkles are appearing about the eyes; her tongue is coated; her hands are bloodless and cold. Every time she looks in the mirror, and she is impelled to do so frequently, her vanity receives a fresh wound. When she rides in a street car or train, she imagines that people eye her curiously; and this drives her frantic.

In the end, terror reigns supreme in her mind. She is positive that nobody under-

stands her case; that it is beyond human understanding—the invention of the Evil One. She lives a life of complete or nearly complete social isolation, and divides her time between bed and couch. To express it mildly, she is difficult to live with; and every detail of household management has to be arranged with a view to her comfort. The *mortal* character of her “complication of diseases” is, with her at least, an accepted fact.

In drawing the above picture, the author does not pretend to absolute completeness of detail. There is still lacking much that might be added without burdening the canvas. The picture is, however, sufficiently accurate in outline to illustrate the steps by which, in the generality of cases, the victim of a purely functional nervous disorder descends mentally to an inferno of terror and superstition. The details in the individual case are largely determined by such factors as age, sex, nationality and social status.

Christian Science, through its worldly wisdom, appreciates the above situation to

a nicety, and when its aid is invoked, it sets immediately to work, by a sort of mental homeopathy, to attack superstitious credulity with its like. It knows perfectly well that the *ascensus averni* is not to be accomplished by any external agency whatsoever, but by a compulsory use on the part of the sufferer of her own latent and, by her, wholly unsuspected energies.

One of the first startling propositions it submits for her consideration is as follows: "All is mind. The five material senses testify to the existence of matter. The spiritual senses afford no such evidence, but deny the testimony of the material senses. Therefore in divine Science there is no material mortal man, for man is spiritual and eternal, he being made in the image of Spirit, or God. There is no material sense. Matter is inert, inanimate and sensationless—considered apart from Mind. If there is any such thing as matter, it must be either Mind which is called matter, or matter without Mind. Soul is the only real consciousness which cognizes Being. The body does not see, hear. smell

or taste. Human belief says that it does; but destroy this belief of seeing with the eye, and we could not see materially; and so it is with each of the physical senses."

After reading through the above example of "nonsense prose," as it may well be termed—for there is neither rhyme nor reason in it—the patient, now a "student of Science," is sure that it contains some "beautiful truth" which her "poor weak mind" has been unable to grasp. She goes over it again and again, pursuing elusive Truth in vain, for the space of an hour. She is about to desist temporarily from the hunt when the following words chance to meet her eye: "Jesus said: 'Take no thought what ye shall eat.' " At once she sees in this a rebuke to her hypercritical attitude toward food, and resolves to give heed to the divine injunction.

The hour just passed has been one of signal triumph for "Science" in several ways. By keeping its "student" at work for *sixty whole minutes* over its verbal jig-saw puzzle, it has diverted her attention for the same space of time, from con-

temptation of self—an occupation in which she has been engaged uninterruptedly for months or years to the unspeakable detriment of her health and happiness. Incidentally it has transmitted to her the divine command—"Take no thought what ye shall eat"—which, in her present state of hyper-suggestibility, will do more to whet her appetite and promote her digestion than any tonic or digestant conceived by "mortal mind." And, finally, it has stimulated her to renewed endeavor to fathom the meaning of its disjointed phraseology.

Spurred by curiosity, she begins again with the proposition—"All is mind" and spends a further hour in study and puzzled thought. At the end of this time Truth still nimbly eludes her grasp, but Introspection begins to hear the unmistakable sounds of its death knell.

At this juncture she turns to "Science" for assistance; and "Science," knowing just how to handle perplexities like hers to its own best advantage, hastens to enlighten her understanding as follows: "There is no pain in Truth, and no truth

in pain; no nerve in Mind, and no mind in nerve; no matter in Mind, and no mind in matter; no matter in Life, and no life in matter; no matter in Good, and no good in matter."

This second proposition is obviously no more illuminating than the first, but after the "student" has gone over it attentively a few times, it sticks to her memory with burr-like adhesiveness. At night, as she lies in bed, in her quiet darkened chamber, waiting for the sleep that ordinarily comes tardily and is haunted by terrifying dreams, the words of the proposition keep going through her brain with the crooning monotony of a lullaby. Presently she is conscious that her lids are growing heavy; then consciousness grows dimmer and dimmer, and is finally obliterated. When she next opens her eyes it is broad daylight, and she realizes that for the first time in, what seems to her, an age, she has had a whole night of refreshing, dreamless sleep. The same operation repeats itself the next night and again the next. By the end of a week, as a result of sound sleep, generous

diet and freedom from introspection, she has the ineffable satisfaction of feeling herself the possessor of more vigor of mind and body than she has known since the beginning of her illness.

Recovery now appears to be an assured fact, but "Science," through its worldly wisdom, is perfectly well aware that the end of the "student's" troubles is not yet. Fear—the most formidable antagonist of the "cure"—has yet to be annihilated, and the conflict may be long and arduous. Nothing daunted, "Science" plans the "student's" campaign against this antagonist, with boldness and dash. It knows to a certainty that her exalted mind will absorb any suggestions ("beautiful truths of Science") that are instilled into it and that, once absorbed, they will, in course of time, drive out the disastrous counter-suggestions of fear. It realizes, however, that, to be quickly operable, they must be emphatic and readily comprehensible. Consequently, the first fear-dispelling *truth* to be injected into the mind of the "student" is as follows: "Mortal ills are

but errors of thought—diseases of mortal mind, and not of matter; for matter cannot feel, see or report pain or disease. Disease is a thing of thought; and *fear is the procurator of the thought, which causes sickness and suffering*. Remove this fear, by the true sense that God is love—and that Love punishes nothing but sin—and you can then look up to the loving God, and know that He afflicteth not willingly the children of men, who are punished because of disobedience to His moral law. His law of Truth, when obeyed, removes every erroneous physical and mental state. The belief that matter can master Mind, and make you ill scientifically, is an error that Truth must destroy.”

Judged from the standpoint of literal truth, the above dictum of “Science” is obviously far from being above criticism, but there is about it a certain coercive finality that, in the end, makes its attack upon fear irresistible. The truth is that in every case where “Science” can really effect a cure, mortal ills are largely “errors of thought” and fear is, most cer-

tainly, the "procurator of this thought which causes sickness and suffering." So "Science" sets to work to eliminate fear at all hazards; there is no other solution of the problem.

Neither time nor energy is wasted in fruitless appeal to the "student's" reason, for "Science" knows that, at this stage of the case, reason is hopelessly impotent in the face of emotion. Emotion can be vanquished only by emotion, so "Science" confronts fear with an emotion thinly but effectively disguised as religion. "Away with the silly beliefs about the meaning of God you now hold!" it says to the "student"; "they cannot help you to rout fear. While you are studying Christian Science, you must give up *all* your previous ideas and acquisitions. You are not even beginning to know God until you are willing to believe that you have *wonderful powers, as you are sure to persist in calling them* (!). Know that it is only the child of God who is above all fear. Let your creed be as follows: God is all love, life, substance, intelligence, power,

knowledge, presence. I am an idea of God, a special thought of the All Good; and in good I live and have my being. Like God or the Good, I am Spirit and Mind, and I reflect Power, Holiness and Wisdom. I am governed by the Law of Good. This gives me love and intelligence, so that I do what I ought to do, and feel happy to think I have done so. I feel free from all fear of having made mistakes, and that these will pursue me and show their consequences in Sickness and Death. I am Spirit, and Spirit is free from all fear.”

Stimulated by the above spiritual cocktail and by the knowledge that she, who hitherto erroneously believed herself to be the last of weaklings, mentally, morally and physically, is possessed of *wonderful powers*, the “student” meets the next onslaught of fear with a calmness that amazes even herself, and emerges from the conflict, with Victory perched upon her banners.

The mental exaltation produced by this victory carries her perilously close to the

brink of the dark pit of madness, and that she isn't swept completely over is a puzzle to the alienist. She now absolutely rejects all evidence of what she scornfully terms the "material senses," and believes herself to exist in Mind only. She has solved the "Problem of Being"—*There is no matter.*

"Science" does not for a moment concede that the "student," in the present over-expansive state of her *ego*, is in serious danger of losing her senses altogether; nevertheless there is, in its next maneuver, a tacit admission that the existence of such a danger is clearly understood.

This maneuver is the injection into her mind of a strong dose of the antitoxin of egotism, i. e., *altruism*. "Affirm to train yourself and help the world," is the command given. "Use such definite denials as: 'I am not proud, greedy, ambitious, cowardly, undecided or captious'—and then *act accordingly.*"

The effects of this altruistic antitoxin upon the "student" are soon made manifest in her deeds. She emancipates the

household from its long bondage of slavery to her whims and caprices, and assumes, in large measure, the conduct of her own affairs. Little by little the horizon of her activities broadens until, finally, she resumes her long-abandoned position in the world, with all the duties and responsibilities her particular social situation entails.

A case, like the above, is counted by "Science" among its most rapid and brilliant "cures," and, for proselytizing purposes, among the ignorant and credulous, it is a tremendous asset.

Let no intelligent person be deceived, however, for the "cure" is, by no means, always so rapid or sensational. Many "students" struggle long and painfully before that degree of autosuggestibility is acquired which enables them to reject the evidence of the "material senses" and repudiate "matter"; while others either wing an unexpected flight to spiritual realms where nothing (*material*) does matter, or, by compulsion, seek refuge in some hospital for the insane—the pathetic victims of an exalted egotism which "Sci-

ence" engendered but was powerless to control.

To the "student" who is fretful and discouraged because "Spirit" seems overlong imprisoned in the chrysalis of the "material senses," "Science" addresses these heartening words: "Fear is your chief enemy, but there are other limits to Spiritual thinking, and these are beliefs in Time and Space. Now, Time and Space, as useful ways of measuring, are not 'Evil'; but as limits they are 'Evil.' To keep looking for results is to keep putting limits on yourself. Who knows but that the thing which is truly and properly your result, due to the use of the law, is something wholly new, unlike anything you ever heard of, and possibly far surpassing it? You should listen, then, the more gladly to the teachings of truth and practise the *rules* all the more diligently for this frank acknowledgment that there are varying degrees in people's seeming success. *Doubt delays fulfilment. No one really fails.* Some sign of joy and certainty always comes. And if it be long in coming, if you

are long in getting your head above water, does that not show how near drowning you were?"

Translated into terms intelligible to "mortal mind," this last instalment of "beautiful truths" simmers down to this: "Don't use up your precious stock of nervous energy worrying as to how long it is going to take you to get well. 'Science' doesn't know any more about that than you do yourself. Just do whatever 'Science' tells you to do, and let the future take care of itself. The less you expect, the less disappointed you will be. You are bound to achieve some good result, although you may not recognize it as such when it comes. If you do happen to recognize it, you should be all the more content. Think how much worse matters might be than they are."

Fortunately for "Science," the "student's" mind is far less critical than the average mortal variety, and readily accepts such platitudes at their face value, with the result that hope is renewed, faith

strengthened and recovery materially hastened.

If the reader is not thoroughly convinced by this time that cure by Christian Science is (practically) nothing more nor less than self-cure, as the writer has already contended, let him retrace critically the steps by which the "student," in the illustrative case cited, arrived at the goal of recovery.

"All is mind. There is no matter," says "Science," and follows these simple declarative sentences with others of equal Jabberwockian terseness and intelligibility. The "student" exerts all her energies in a fruitless search for the health-giving truths which are supposed to lie hidden in these portentous utterances and, *by her own endeavors*, finds, not truth, but freedom from deadly introspection. Next she regains her appetite through the injunction—"Take no heed what ye shall eat"—which comes from Jesus, not from "Science." Then sleep is restored to her by the soporific cadence of senseless words that take possession of her brain at night and annul its activities. And the final

obstacle to recovery—fear—is removed by the exercise of the *wonderful powers* “Science” tells her she has, but does not claim to furnish.

In the so-called absent treatment the situation is identical. Here the patient is informed in advance that the “healer” will begin her ministrations at a certain fixed time. This forewarning is, in itself, a genuine *coup de théâtre*. It seizes upon the sufferer’s imagination with a grip of steel, and creates an expectancy of benefit about to accrue, so intense that everything else is excluded from consciousness for the hour, or whatever space of time the “treatment” is supposed to cover. The result is that, for an equal space of time, disturbing thoughts and uncomfortable feelings of all sorts are completely sidetracked, and “Science” has made a new convert.

This first demonstration of the “wonderful healing powers of ‘Science’” immediately arouses the patient’s desire to know more about it, and she is soon enrolled as a “student.” From that point on, if success attends the combined efforts

of "student" and "healer," the so-called cure is ultimately accomplished in the manner already described.

If the reader requires still further proof that *self* plays the star rôle in the cures ascribed to "Science," and that "Science" is but little more responsible for its "gifts of health" than Santa Claus is for the Christmas variety, let him give heed to its following naïve utterances, and yield to conviction.

"We think everybody knows and accepts that the nobler you become, the nobler your influence. And yet we are aware there are persons who would agree to all this, *and nevertheless be frightened away by the word, self-training.*

"A little practice will make felt what no telling or talking could get any one to believe, that the better you prepare yourself, by proper use of Denial and Affirmation, the clearer you become; the more rapidly you can perceive the way to remove error (disorder) and so heal. *In fact it might be said that every bit of such training you give yourself could actually be*

counted as in immediate connection with every bit of good you achieve. This may be either in future healing, by perceiving what error you have to cast out, or in daily life, by casting it out, almost without recognizing what you are doing. The saying over of any Denials or Affirmations is but one part of self-training, of course; upon the saying must follow duty.'¹

Here "Science" speaks with its own lips. And this final pronouncement as to the all-importance of self-help in its "cures" is so simple, direct and altogether unequivocal, that further discussion of the subject is at once rendered superfluous.

¹ *Christian Science Healing; Its Principles and Practice*, by Frances Lord. London, 1888. George Redway. (The italics are the author's.)

CHAPTER III

THE EMMANUEL MOVEMENT AND ITS DOCTRINE OF HEALTH

Dispassionate analysis of the healing principles set forth in the writings of the originators of the Emmanuel Movement discloses no reprehensible fanaticism—religious or medical; no claim that physical and mental well-being is attainable otherwise than by the strictest obedience to the laws of hygiene; nothing, in a word, that transcends common sense in its application to matters human or divine.

Unlike Christian Science, Emmanuel is not nihilistic in its views concerning the existence of disease. For example, it calls cancer—"cancer," not an "error of mortal mind"; and indulges in no idle bluster respecting its powers to remove "error" of this sort. As a matter of fact, it states

expressly that its curative endeavors are rigorously confined to the realm of functional disorders of the type mentioned in Chapter I. And from the beginning to the end its ministrations, the vital importance of self-help, in the struggle for freedom from the yoke of a bedeviled nervous system, is constantly emphasized.

He who thinks that the only requisite for cure by Emmanuel is a supine willingness on the part of the sufferer to allow himself to be translated, by a spiritual short-cut, to the goal of health, is indulging in a Utopian dream, out of which the following extract from "The Christian Religion as a Healing Power"¹ should effectively awaken him: "...we are not ignorant that the danger attending all efforts to help the sick or the morbid is that of fostering a spirit of dependence and blind obedience. The aim of every one who would help others, whether as min-

¹ *The Christian Religion as a Healing Power. A Defense and Exposition of the Emmanuel Movement*, by Elwood Worcester, D. D., Ph. D., and Samuel McComb, M. A., D. D., pp. 104, 105.

ister, or teacher, or physician, must be to bring about self-direction, to enable the miserable or the immature to get a hold on themselves and to become their own legislators. Not to create spiritual weaklings, but robust, self-governing and efficient personalities, is the aim of our efforts. Many nervous people think that their salvation must come from the outside....With such persons, it is one of our methods to insist that the cure, if cure there is to be, must come from within; that it is an achievement of their own will, the product of their own character. We give hints and suggest methods by which they can push their way through this and that obstruction to the goal of nervous health. We believe with Feuchtersleben (*The Dietetics of the Soul*, passage lxxii) — that 'when a man strives with all his power for a certain object, he will attain it. For desire is only an expression of that which is conformable to our being. To him who knocks it shall be opened. We find daily examples of adventurers who have striven for wealth or fame, and

gained them. Why should it be otherwise with health?' "

Now the methods Emmanuel adopts, to enable sufferers "to push their way through this and that obstruction to the goal of nervous health," are as rigid and orderly as those of a hospital clinic; in fact, they are identical with the latter in all essential respects. There is nothing supernatural about them, in spite of much popular misconception, based upon an over-ready and boundless credulity, to the contrary. There is, in short, little about them that is not entirely conventional and they pretend to restore nobody to health, in the twinkling of an eye, by a trick of spiritual *legerdemain*.

Whatever of the spiritual element there is in the treatment flows from a source gratifying to all Christian peoples alike—the New Testament. And physiologic psychology furnishes the channels through which this element reaches the mind and heart of the sufferer for his moral and physical uplift.¹

¹ Op. cit., p. 10.

Through psychology, Emmanuel realizes that man is not a mere animal organism, nor yet a mere intelligence served by organs; but that "body and soul together constitute the integrity of human nature; that these two are mysteriously but most intimately associated, so that for every event in the one there is an event in the other, and that no good nor evil can come to man which does not affect the whole man, soul and body."¹

Through psychology also it understands the law of suggestion; namely, "that desirable states and conditions, skilfully placed before the mind when the mind is receptive, have a tendency to realize themselves through the mechanism of the nervous system."²

To science, then, Emmanuel is indebted for the knowledge which enables it to apply religion to the practical end of healing. And, in all justice, be it said that it makes most grateful acknowledgement of the debt. What is more, the cordial attitude

¹ Ibid., pp. 11, 12.

² Ibid., p. 12.

of Emmanuel toward science by no means ceases here. In every move it makes there is a tribute to science, and a rebuke to superstition which seeks to invest it with supernatural and mystical powers it makes no claim to possess.

Science, in the person of the skilled physician, not only aids it in the selection of cases, but also, by bringing the successful aspirant for treatment under the beneficent influence of hygiene, lays the solid foundation for his moral upbuilding, the only part of the cure Emmanuel claims to effect.

In thus securing the adhesion of the Emmanuel patient to the laws of hygiene, science also might, with justice, claim to play a part in his spiritual uplift, for the laws of hygiene are essentially moral laws. Be this as it may, science is the indisputable prop of religion from the beginning to the end of the cure.

The purely religious ministrations of Emmanuel are, then, strictly limited to the mental and moral aspects of a given case; and these latter may stand either in

the relation of cause or effect to the bodily disorder which is, or has been, present. It matters little what the cause of the sufferer's trouble may be—drug habit, alcoholic abuse, inordinate or perverted sexual appetite and indulgence, or some maleficent agent, like worry, outside the moral sphere—the burden under which he is oppressed, when he casts himself at the feet of Emmanuel, is one of perplexity and discouragement. Fear has thrust reason into the background and liberated atavistic tendencies to belief in demoniacal possession. Hope is sadly on the wane, and the small fragment of faith that remains to the sufferer owes its existence to his belief, not in the power of man, but in that of God alone, to relieve him of his torment.

Fear, then, is Emmanuel's central point of attack. The Church realizes, just as Christian Science obviously, though not avowedly, does, that reason is of no avail to check the mental, moral and physical ravages of this demoniacal emotion, and frankly says so. Consequently, it sets

about its task of exorcism, not after the crude fashion of the primitive Church, but by nurturing, in every sane and possible manner, the sufferer's faith in the healing powers of Christ, as revealed in the New Testament.

Emmanuel fully understands the marvelous power of joy to set in action the constructive forces of the body. And faith is one of the most joyous emotions. Whatever arouses faith affects intensely the automatic bodily functions. Even the most blindly credulous form, that of the Christian Scientist, for example, may work physiologic results that are unquestionably beneficial. Such superstitious faith, however, is impotent to build up character or arouse to new activity dormant ethical forces. "Ethically and spiritually," says Emmanuel,¹ "it [superstitious faith] can achieve only harm. The more deeply personality is involved in any given ailment, the more necessary is it that faith should have an object worthy of man's ethical

¹ *Religion and Medicine*. Chapter xvi. (Dr. McComb), pp. 294, 295.

dignity and one fitted to draw forth in reverence all his moral and spiritual energies. Such an object can be found alone in the supreme Reality, the Father of Spirits.

“There are many who feel with Frederick Denison Maurice that the God thus offered to faith seems too often but a dim shadow thrown from our own minds with which no vital contact is possible. But in Christ we see unveiled the glory of God. There have been other great teachers, great reformers, great saints, but in Him the Divine has entered in a unique way into humanity and thus offers itself to the love and faith of men. There are aspects and regions of this Divine nature inaccessible to our limited minds, and hence an element of reverent agnosticism must enter into all our thinking about God, but that aspect of His being which can be apprehended by human faculties is revealed in Jesus as it is revealed nowhere else. He interprets God to us. The shadowy, the abstract, become in Him real and concrete. In His suffering, in His teaching, in His compassionate activity as the

healer of the souls and bodies of men, in His entire person as the embodiment of all those qualities which are most divine yet most human—in all this we see God's inmost feeling, His attitude toward the world and toward the individual soul. Trust in such a God draws together the scattered forces of the inner life, unifies the dissociation of consciousness created by guilt and remorse, soothes the wild emotions born of sorrow or despair, and touches the whole man to finer issues of peace and power and holiness. By the sweet constraint of such a faith, the jarred and jangled nerves are restored to harmony. The sense of irremediable ill disappears and hope sheds her light once more upon the disordered mind."

Faith is, then, the emotional force which enables the sufferer to throw off the shackles of fear, and arouse to utmost activity the potential energies of his soul, in the work of mental, moral and physical salvation.

Among the auxiliary forces of faith are prayer and good works, and these the suf-

ferer is counseled to indulge in, to the top of his bent. Passive prayer, so-called, is the form which, according to Emmanuel, is best suited to the need of many nervous sufferers. "In order to exercise it mind and body must be relaxed. There should not be in the mind the thought of any definite, concrete boon, but rather a calm yielding of one's self to the power and presence of God. The only desire that the sufferer should have is that of surrender, of absolute passivity, so that spiritual force and blessing may enter in and take possession of the soul."¹

The "good works" the sufferer is urged to perform are nicely adjusted to his mental and physical powers, and to his purse. They may amount to nothing more than the bringing of a message of cheer to some one more unfortunate than himself; but whatever they may be, they have a distinct psychological significance, as will presently be shown.

Opportunism is the keynote of the

¹ *The Christian Religion as a Healing Power*, pp. 79, 80.

Emmanuel Movement, but there is about it an air of disinterested philanthropy which, if genuine, neutralizes the opprobrium ordinarily attaching to this term.

Its spiritual method of repairing the moral havoc wrought by an age of sordid materialism is entirely commendable, even though it be somewhat unconventional. It seeks to make the sufferer realize that the Creator has not forsaken him, as he, plunged in an inferno of mental anguish, is inclined to believe; and that man is not as remote from the remedial influence of the Great Physician as earth is from Heaven; on the contrary, that the healing Presence is as close to him today as it was to those from whom Christ, the Son of Man, in person lifted the burden of disease.

The Saviour whose precept and example Emmanuel endeavors to make clear to the sick, is not the Saviour of the "Mother (Eddy) Church." For Him disease is no fancy of "mortal mind" but a real morbid entity. And the simplicity of the language He employs with regard to it is in refreshing contrast to the jargon of "Science."

Furthermore, and this point should be pondered by all who may have leanings toward the false gods of Eddyism, it is clearly shown, by all the evidence at command, that He exacted no tribute, save that of Service, from those to whose sufferings He ministered.

This simple picture of Christ as the Son of Man, going about the earth for the alleviation of human suffering, has a greater psychotherapeutic influence than all the combined word-paintings of optimistic writers from Epictetus to Emerson. The human touch in it makes an irresistible appeal to the sufferer's mind and fills it with an inexpressible fervor of faith and hopeful expectancy.

Psychology interprets it as an inhibitory suggestion, which owes its curative influence to its powers to arouse a joy-emotion sufficiently vast and dominating to suppress completely all pre-existing emotion of a depressing and devitalizing order.

The physiological results of this newly-created emotional state are soon manifested in a variety of ways. The auto-

matic processes of the body, as exemplified by the circulation, respiration and digestion, are carried on in a more stable manner, a distinct check is put upon the leakage of nervous energy, the power of endurance is sensibly heightened and abnormal bodily sensations of all kinds lose their vividness.

The sense of well-being, which results from this harmony of physiologic action, leads very naturally to an accretion of the emotion giving rise to it; and a beneficent cycle tends to establish itself. Even with this tendency, there is still a danger that the force of the joy-emotion may spend itself before the desired result is completely attained. To avert this danger Emmanuel incites the sufferer to prayer, which, by constant repetition, fosters, and even increases the intensity of, the original emotional state.

In psychologic terms, prayer is a form of autosuggestion, which naturally acts more effectively when the devotional attitude is one in which consciousness is completely detached from earthly distractions

of every kind, and is as completely absorbed in the thought of the power and presence of God. The physiologic effects of prayer are identical with those of the corresponding joy-emotion, faith.

The "good works" recommended by Emmanuel also have their psychologic significance, as has already been stated. They are in fact merely another form of autosuggestion, and fulfil a very practical curative aim. They tend to wean the sufferer from the dangerous egotism, to which he is so prone from the very nature of his trouble, by substituting for it a practical altruism fashioned after the example of Christ himself. As a result, the psychotherapeutic effects of faith and prayer are both enhanced to a marked degree.

From all that precedes, the theory and practice of Emmanuel must be clearly intelligible to every one. The idea which underlies and shapes its methods is that the victim of a functional nervous disorder is sick in soul as well as in body, and cannot be made well until enduring harmony is established in the activities of these

most intimately related constituents of his nature.

Through the aid of science in the form of hygiene, Emmanuel first removes, as far as possible, all physical obstacles to this work of complete regeneration. From hygiene the sufferer learns the sanitary value of sunshine, air and water; the need of regularity in work and rest; in a word, everything that makes for the highest physical efficiency.

Emmanuel then begins the task of spiritual renovation. And here again science—this time in the form of physiologic psychology—furnishes it with the means (suggestion and autosuggestion), by which religion is made a practical healing force.

Christianity, applied through suggestion and autosuggestion, directly alters the emotional tone of the sufferer from fear to joy, and, indirectly, brings about beneficial results in the automatic physiologic processes of his body. Under the stimulus of this newly-created joy-emotion, he is enabled to view life sanely, to appreciate the causes and real significance of his suf-

fering, and to arouse to activity the hitherto dormant energies of his soul in his struggle for complete mental, moral and physical redemption.

From first to last, the importance of the rôle played by *self* in the cure is so plainly manifest, and has been so clearly set forth and emphasized by Emmanuel in the passages from its writings already quoted, that no further elaboration of this point seems necessary. In the language of the law, *res ipsa loquitur*.

CHAPTER IV.

NEW THOUGHT OR THE PSYCHO- THERAPY OF OPTIMISM

Together with Christian Science and several other modern forms of metaphysical healing, so-called, New Thought owes its inspiration to a common source—the doctrines of Phineas Parkhurst Quimby. But whereas “Science” represents a consistent schism tainted with heresy—the absolute denial of the existence of disease—New Thought, up to the time of its “reformation” (or simplification¹), less than ten years ago, adhered closely to the Quimbian ideas in their original form. In fact, these ideas still form the basis of its system of soul therapeutics.

¹ *The New Thought Simplified. How to Gain Harmony and Health*, by Henry Wood. Boston, Lee & Shepard, MCMIII.

Quimby, it should be understood, did not teach that disease was a nonentity, as certain writers affirm. On the contrary, he expressly acknowledged its reality, but maintained that it was the result of an imperfect mental state, and could be cured by "getting the mind thinking right."

Now, it must not be inferred, from what has been said, that New Thought Simplified renounces its belief in disease as an entity. Quite the opposite. It does not stop, as Quimby did, with the mere admission of the existence of disease, but classifies it into two distinct and separate orders: the acute, contagious and rapid; and the chronic and gradual. Nor is this the limit of its concessions to the demands of a grossly material and benighted age. It goes so far as to grant that, in cases belonging to the first-named order, the services of a regular physician are, at present, indispensable; although it hastens to assert its belief that, even in such cases, coöperation between the mental practitioner and the doctor of medicine is destined to become more and more common. Cases of

the second order it reserves unqualifiedly for its own exclusive ministrations.¹

It is somewhat difficult to determine just what cases are included in this second order, owing to the fact that New Thought occupies itself, for the most part, with soul phenomena, rather than with the material bedside variety. All available evidence goes to prove, however, that they belong, without exception, to the category of functional nervous disorders of the type already fully discussed in the chapters on Christian Science and the Emmanuel Movement.

Part of the evidence leading to this conclusion is furnished, quite unconsciously, by sufferers who find a healing balm in New Thought; the rest comes from New Thought itself in the shape of an attempt to explain the origin and nature of the troubles with which it deals.

In the dismal tales of previous suffering told by the converts to New Thought there is a startling similarity to those related by the adherents of "Science." They are

¹ Ibid., p. 160.

all pitched in the same minor key, and all are replete with hyperbole, born of terror. Through ignorance of their significance, individual symptoms are regarded as separate and distinct diseases, so that by the time the sufferer, discouraged by repeated failures to obtain relief through conventional medical treatment, turns to New Thought for help, he invariably believes himself to be suffering from the well-known "complication of diseases," so characteristic of the victim of functional nervous disorder. Furthermore, he harbors a belief, which he may or may not openly avow, that Satan has a hand in his troubles; and this belief naturally impels him to take up with a healing cult which assures him of aid from divine sources.

The portion of the evidence furnished by New Thought, in its views on the origin and nature of "disease," is more conclusive still. It says: ¹"Metaphysical healing has fully demonstrated that the

¹*New Thought Essays*, by Charles Brodie Patterson. New York: The Alliance Publishing Company. Pp. 27-32.

imagining (!) faculty of man is responsible for all the ills from which he suffers. . . . Our thoughts are first ideated(!), then expressed outwardly. The expression must correspond to the inner thought. If this is inflamed, inflammation will make itself felt in the body. If a person is given to thinking harsh, unkind thoughts, or saying cruel, cutting things—if he is sarcastic in his remarks—it will certainly be found that this mental state has produced neuralgia; or if he is sensitive to the unkind remarks of others, the suffering experienced inwardly will produce itself outwardly in neuralgic pains.

“There is a fourfold action between mind and body that should be understood. The primary cause for everything originates in the mind, and then works outwardly. First, the mind acts; this is followed in turn by a responsive action of blood and muscles; then comes mental reaction, which is followed by a physical reaction—the body thus corresponding to the ever varying moods of the mind. Consider as an illustration the action of anger.

We know that this is a mental emotion, but note its instantaneous effect upon the blood and muscles. The heated and contracted mental state produces a corresponding physical state; and, according to the laws of being, the excessive action produces a corresponding reaction. When this reaction takes place, there is a decided lowering of tone in the mental condition of the angry person, which is inevitably followed by a weakened state of the body. This law applies equally to emotions other than anger.

“For everything real in life there is an unreal semblance, which is its contradiction. For every true impulse that enters the mind from the soul, there is a simulacrum that acts upon the mind from without, producing a false emotion, which, in turn, tends to destroy the physical organism. One builds up; the other tears down. One works from the inner outward, while in the other this action is reversed. True emotion is caused by the inner impulse; its contradiction is caused by persons or conditions external to the personality.

“Wherever mental contraction is found, you will find its physical anti-type. Muscular contraction is often caused by sorrow for loss of friends, or of money. Wherever loss is felt to a marked degree, corresponding contraction takes place in the body. Muscular rheumatism frequently results from grief for the loss of friends. Paralysis is usually caused by mental shock. It may be regarded as a withdrawal of the forces of life; i. e., the blood, no longer flowing naturally throughout the body, fails to carry sufficient nourishment. Paralysis may be caused by different kinds of mental shock—anything that strikes deeply into the life of the individual. A failure in business often causes paralysis, the lower limbs in that case being affected to a great degree. The limbs correspond to the sustaining power; and, through the loss of money, the personality believes the sustaining power to be withdrawn. Sometimes, without shock, when the rest of the body seems perfectly well, the limbs lose their power of locomotion and refuse to

carry the body. This is usually caused by the loss of friends or others upon whom the person was dependent, or by the loss of worldly goods....

“The relationship between the blood and its circulation is of great interest.... True mental action causes the blood to flow normally through the body. Conditions acting on us from the outer world are largely responsible for mental impurity and improper circulation of the blood. A disturbed circulation can nearly always be attributed to the emotions.

“One who thinks to excess will find that such action produces an untrue movement of the blood, causing it to flow unduly to the head. The brain demands both rest and nourishment. The circulation should tend as much to one part of the body as to another.... All unpleasant emotions have an adverse action on the blood.

— “It is noticeable that intellectual people are generally troubled with either indigestion or dyspepsia.... they cram the minds with many things they have not mentally digested, and this mental indigestion

is the forerunner of a corresponding physical condition. Again, we find people with good digestion who do not properly *assimilate* their food. This result corresponds to knowledge which they have clearly perceived but failed to use...."¹

From this crude and, in many respects, fanciful depiction of the havoc wrought by the "imagining" faculty, it is obvious that *all the ills* from which, according to New Thought, man suffers, correspond, in every essential detail, to those which medical science attributes to functional disorder of the nervous system. Hence, the fact is at last established, that Christian Science, Emmanuel and New Thought face precisely the same problem. And it now remains to show by what methods New Thought attempts solution of this problem.

The reader who fancies that New Thought is possessed of some wonderful occult power which immediately works in the sufferer a transformation from sickness and suffering to health and happiness, is doomed to swift and bitter disappoint-

¹ Ibid., pp. 20, 21.

ment. For a professedly metaphysical system there is a striking materiality about its doctrines, as the following passages¹ show. "...New Thought is in full accord with all reasonable hygienic principles.... Nature with all her varied and wonderful resources is beneficent and truly friendly to human welfare. It was formerly thought that she needed to be corrected and even opposed. But compliance with her laws is now becoming the general aim and object.

"Like everything else, hygiene may be overdone and become slavish. Only then is it out of accord with mental hygiene. To live by rigid rule, in detail, makes life mechanical, and destroys a natural and elastic spontaneity.

"While plain and simple foods and moderation in quantity are important, digestion is in great degree a matter of mental states....Too much food is a far more common error than too little. The laws of life put a premium upon moderation.

"Stimulation, whether through the use

¹*New Thought Simplified*, pp. 128-132.

of spirituous liquors, drugs, tobacco, or strong tea or coffee, involves the formation of a debt which draws compound interest With all the light of the present time, it should not be necessary to urge upon intelligent people the importance of plenty of fresh air, including open windows in sleeping-rooms at night, cultivated and systematic deep breathing, the thorough mastication of food, plenty of pure water, frequent bathing, all-around judicious exercise, purity in mind and body, and, in general, prudent care without anxious thought."

These hygienic principles are eminently sane and commendable, and New Thought, in teaching the sufferer how he must treat his body before he can expect it to respond to spiritual ministrations, shows its entire allegiance to medical science, if not to *materia medica*, in the very first step of the cure.

On its purely spiritual side, the healing method of New Thought is absolutely identical with that of Emmanuel, its basic principle being the inculcation of faith—

Faith in the omnipotence of Christ, The Healer, and in His ever-ready willingness to relieve human sickness and suffering, if the sufferer will but send his consciousness aloft among higher harmonies and ideals.

— Now, New Thought, like Emmanuel, knows that the fire of spiritual faith, once kindled, must be constantly nurtured or it will soon be stamped out by the pessimism naturally engendered by the trials, disappointments and reverses of every-day existence. So it does its utmost to keep alive this fire by instilling into the sufferer's mind an all-embracing doctrine of optimism, and by providing him with a set of "mental and spiritual gymnastic exercises"¹ which, through incessant use, will lift his consciousness to the level of harmony and ideality necessary for the influx of the "Universal Spirit of Wholeness."

Imbued with the doctrine of unlimited optimism, the sufferer, in his daily life, naturally follows the path of least resistance or rather, of non-resistance. He goes

¹ *New Thought Simplified*, pp. 165-195.

on the principle that his *seeming* trials and pains are not really "against him," displays no impatient or rebellious spirit toward person, place, thing or condition, and avoids friction in every possible manner.

The best results from its "mental and spiritual gymnastic exercises" are to be obtained, according to New Thought, by "going into the silence." So it directs the sufferer to retire each day to a quiet apartment. Arrived there, he is to assume the most reposeful position practicable; to breathe deeply and rather rapidly for a few moments, and then thoroughly relax the physical body. Next he must bar the door of thought against the external world, shut out all physical sensation and imperfection as far as possible, and rivet his mind upon the "exercise." Nor must he stop with the mere reading of and thinking about the "truth" it contains, he must try to *feel it with every nerve center in the body.*

From ten minutes to an hour is the time recommended to be spent in each ex-

ercise, and during this time periods of intense concentration are to be alternated with others of utter relaxation.

A glance at the psychology of this New Thought method shows at once its identity with that of Emmanuel. It is the same story of the renewal of harmony in the automatic physiologic processes of the body through the dominant activity of the joy-emotion of faith, inculcated by the suggestion that the healing power of Christ is available to all who invoke it in the proper spirit.

The gain thus made is held by the sufferer through self-suggestion in the form of an optimism, which guides him along the path of non-resistance in daily life—in other words, permits him to conserve his slender stock of nervous energy instead of dissipating it in worry over daily trials, great and small. And what is more, self-suggestion, in the form of mental and spiritual gymnastic exercises of a highly-optimistic character, keeps alive the original joy-emotion of faith and finally enables the sufferer to bring into harmonious coöp-

eration the latent energies of the soul, so important for success in the work of nervous salvation. The "going into the silence" to perform these exercises corresponds to the attitude of relaxation and detachment assumed by the Emmanuel adherent during prayer. Its psychologic significance has already been shown.

What toll New Thought exacts from its adherents, the writer does not profess to know; presumably nothing more than the price of its publications. It is a matter of no particular moment. The important fact still remains that, in last analysis, the cases which attribute their recovery to New Thought are of precisely the same order as those that reach the goal of health through allegiance to Christian Science and Emmanuel, and that, after all, self-help is the common factor which conditions the cure.

In final support of this constantly reiterated assertion, New Thought, following the example of Christian Science and Emmanuel, lends the weight of its testimony, in these unmistakable words:

“It follows that faith cure, instead of being a rare and unique accomplishment, has been of universal even though hidden application. *Being within ourselves, it is a force so near that we look right through and beyond it. All the credit is bestowed upon some object outside.* It is true that the lower orders of faith require some seen object or fulcrum upon which to rest.

“But, though working within, the power of an intelligent faith does not belong to the lower selfhood or consciousness. Primarily it is the divine power working *in* man, though it potentially becomes his own to the degree that his higher selfhood is unfolded.”¹

Surely, the importance of the rôle of self in so-called mental healing could not be set forth in language more positive and convincing.

¹ *New Thought Simplified*, p. 124. (The italics are the writer's.)

CHAPTER V

ON CHARLATANRY IN GENERAL; ITS METHODS AND LIMITATIONS

Of the remaining so-called metaphysical healing cults there is very little to be said. They are all modeled on the same pattern as Christian Science and New Thought, and their scope and limitations are precisely the same. All assert the sovereignty of mind over matter, and extol the universal curative power of faith, prayer and optimism.

Now, these three agencies are splendid things in their way. Optimism, for example, by enabling its possessor to rise superior to the trials, tribulations and bitter disappointments of every-day existence, helps wonderfully to conserve nervous energy, as already pointed out in connection with New Thought. And faith and prayer,

if they are genuine and fervent, are capable of changing the emotional tone of the victim of a functional nervous disorder in such a way that a cure is effected. Even in painful and incurable organic diseases they may inspire a patient with sufficient strength to endure his sufferings with fortitude and resignation. But to go beyond these very definite limitations and ascribe to faith and prayer the power to eradicate ailments which well-balanced and scientific physicians of years of observation and experience have found to resist all the rational methods of medical science, is to cast aside reason and become the willing slave of credulity and superstition. Nevertheless, this is exactly what the thousands of well-to-do and intelligent people, men as well as women, who take up with some ultra form of faith cure, notably Christian Science, are doing every day.

On first thought it is impossible to comprehend how such manifest folly can appeal so powerfully to people living in an age which boasts loudly of its intellectual enlightenment, but a little consideration

serves to make the whole matter clear.

As already stated, man may attain to the most lofty heights of intellectual development, and yet remain in abysmal darkness so far as a true understanding of even the simplest matters pertaining to bodily health and disease is concerned. Hence, it is obvious that no amount of learning, however great, which does not include a knowledge of self in the broadest sense, can prevent mankind from becoming the easy victim of the most specious charlatanry.

In the face of these facts it is idle to discuss the matter of intellect in connection with people who take up with therapeutic tomfoolery in any of its varied forms. The whole sorry business is purely a matter of the emotions, and on its emotional side human nature is very much the same to-day as it was in the days of primitive man.

Centuries of evolution have abated but little our belief in omens, portents and charms or our love of the occult and the marvelous. Foibles such as these are as imperishable as the soul itself, and one

grade of society is no more free from them than another. The sentimental cook or chambermaid believes in the potency of love-philters and consults her Dream Book, while the mistress of the house quakes in terror at the thought of making a thirteenth at table, and accepts with great satisfaction the dicta of some long-haired, frock-coated and white-cravated personage who assures her that certain natural lines on the palm of her hand denote long life and great riches. The peasant who decorates his belongings with safeguards against the "evil eye" has his counterpart in the individual who wears a cheap brass ring on his finger, or carries a horse chestnut in his pocket, to ward off rheumatism. And level-headed men of affairs, men who "in the way of bargain cavil on the ninth part of a hair" and laugh to scorn the simple-minded buyer of a "gold brick," naïvely make the same sort of purchases every day, in the shape of vitality-restoring contrivances, which act through the imagination only.

Similar examples might readily be mul-

tiplied, but enough have been given to prove that, in the hands of the charlatan, people in general are nothing but absurd puppets, and that their emotions are the strings by which they are worked.

All such people display the same childish terror, not only of disease but of the physician and the scientific methods employed by him in diagnosis and treatment. Some, however, have a strong faith in material remedies, and, in consequence, look upon the patent medicine quack as their natural protector against the machinations of orthodox practitioners.

Protective benevolence is the strong point of the vender of nostrums. Any one can tell that from a mere glance at the pictures of him in the advertising columns of the newspapers, or, better still, at the florid lithographic portraitures that everywhere adorn the bill-boards. But benevolence is, by no means, his only strong point. Wisdom sits upon his dome-like forehead, and from his eyes, deep set under shaggy, arching brows, gleams the clear light of understanding. Surely, disease is

bound to be vanquished when such a noble creature as this declares his allegiance to the cause of suffering humanity.

He never subjects anybody to the indignity of physical examination. The very nature of his "simple and infallible" remedies makes such a procedure superfluous. Moreover, he scorns to employ the deadly poisons with which *materia medica* fairly teems, and denounces in no measured terms the methods of cruel and bloodthirsty surgeons. His are the "simples," which Nature, after her well-known whimsical fashion, reveals only to a chosen few, for the alleviation of every ill to which mankind is heir.

Among these favored ones chiefs of savage tribes, African missionaries, Quaker and Shaker Sisters and similar philanthropic individuals invariably hold the foremost place; and so overmastering is their desire to check the inroads made by the practices of heartless medical men upon the public health, that, directly Nature confides to them an infallible remedy, they gladly turn it over to some "benevolent

friend of suffering humanity," in order that he, with his great sagacity, may employ it to best advantage in staying the ravage.

Most wonderful of all is the manner in which these always simple, yet always infallible, remedies act. Once taken into the system they find their way with unerring accuracy to the seat of the trouble and begin immediately the work of eradication. The nature of the disease is a matter of no consequence whatsoever. Cancerous growths and tuberculous deposits melt away before them like ice before a July sun. They create new linings for worn-out stomachs, stir up sluggish livers, promote peristalsis, restore substance and power to withered and palsied limbs, renovate impoverished blood and check epileptic seizures. In brief, there is no disease known to man that can retain its foothold in the human system, once these powerful agents are set at work for its expulsion.

Curious to relate, however, even such a priceless boon as these marvelously potent specifics fails to satisfy all the material-

istic malcontents under consideration. Some prefer to be restored to health by the deft manipulations of the Osteopath, whose stupendous discovery that nearly all the ills and ails of every-day life are due to people's unconscious, but none the less pernicious, habit of throwing some portion of the bony skeleton out of alignment, fully justifies the biblical saying that man is fearfully and wonderfully made.

Others have recourse to the health-giving powers of magnetism—not the “malicious” animal variety that persecuted Mrs. Eddy with such wanton cruelty, but the beneficent sort peculiar to “magnetic healers” who, by the mere laying on of hands, draw disease from its lurking place in the innermost recesses of the system out through the pores of the skin.

Others still find a panacea in a truly extraordinary form of electricity, generated by a cunningly fashioned belt worn about the person. It was this simple, yet marvelous, contrivance that enabled Ajax to defy the lightning. At least, that is what one gathers from the fact that in the ex-

cellent likeness of him which accompanies the advertisements, he has absolutely nothing else on. Be this as it may, the electric current produced by this belt is unlike any other known to mortal man. One can (in the pictures) actually see it darting from the belt in every direction, and, with a little imagination, one might easily hear it hiss as it goes. But, *mirabile dictu!* it produces in the wearer of the belt no physical sensation whatever—nothing but the satisfying conviction that it exterminates his disease, presumably by a process of electrocution, and fortifies his system against all further inroads.

A final group of these malcontents is thoroughly imbued with the belief that, whereas many people, while in the flesh, may be guiltless of all knowledge pertaining to the diagnosis, prognosis and treatment of disease, they become adept in these three important branches of medical science within a certain time after they have “entered into spirit life”—so adept, indeed, that the keenest and most experienced physicians on earth are mere

ignoramus in comparison with them. Consequently, when one of this group falls ill, he scorns all curative measures suggested by mere man, and harkens only to the counsels of departed spirits.

To the uninitiated it seems like downright cruelty to bring any one back from Paradise to this terrestrial scene of suffering and misery, merely for the sake of gratifying a desire to know how some trifling ailment may most easily be got rid of. But the facts prove this not to be the case. Heaven soon grows irksome to spirits, once they have attained to any degree of knowledge in matters medical, and even the most finical among them enjoy getting into earthly garb and spending an occasional evening with decidedly mixed company in the dimly lighted and badly ventilated back parlors of people, whom, in their earthly existence, they would have scorned to know.

Furthermore, when the serious business of diagnosis and treatment has been attended to on such occasions, there is nothing the average materialized spirit enjoys

more than an evening's frolic of the "rough house" variety. Some of its favorite antics are tipping over articles of furniture, preferably tables, pinching people's limbs, creating draughts and slamming doors. But its supreme delight is to get hold of a banjo and a tambourine and produce noises so discordant that, by contrast, many a modern opera sounds like real music.

Certain spirits exhibit a weakness for prescribing "the same abominable medicines used on earth," and for predicting "the doom of patients after the manner of ignorant medical prognostication."¹ Such malpractice is quite unpardonable. Spirits should refuse to materialize until their celestial medical education is complete. Otherwise many uncharitable mortals will come to regard their vaunted healing powers as a mere pretense to get back to earth for the sole purpose of indulging the purely antic side of their characters.

With the treatment of disease simplified

¹ *Spiritual Science of Health and Healing*, by W. J. Colville, Chicago, 1887. Garden City Pub. Co., p. 194.

to the above extent, it does seem as if everybody ought to rest satisfied. But, no, there still exists a large class of individuals who reject material remedies in every form and center their faith in a rhetorical soothing syrup compounded of garbled scriptural interpretation and perverted esoteric philosophy.

There are several brands of this rhetorical compound on the market, but the most popular is that discovered by Mrs. Eddy—soothing syrups are invariably the discovery of a Mrs. Somebody-or-Other. And as the virtues of Mrs. Eddy's panacea have already been fully extolled in the chapter on Christian Science, further consideration of it and similar rhetorical nostrums is unnecessary at this time.

From the foregoing it must be obvious to the reader who possesses the saving grace of a sense of humor, that the one thing the charlatan sedulously avoids curing is mankind's love of self-stultification. This thankless task devolves upon medical science, but so long as people continue to hug the delusion that there is a royal road

to health and to prefer the semblance of truth to truth itself, such a task can never be fully accomplished.

It is difficult to save people from themselves, even by enactment of legislature. Impartial Justice—in the form of the Pure Food Law—has called a halt to the widespread popular habit of self-poisoning, by putting a ban upon the manufacture and sale of all “simple and infallible” nostrums containing cocaine and morphine, but there is still a brisk traffic in others which Chemistry—equally impartial with Justice—declares to contain nothing but inert substances dissolved in dilute alcohol.

There is an old Latin adage to the effect that the nature of a disease may be determined by the character of the remedies which bring about its cure, and the truth of this adage is attested by the everyday experience of observant physicians. Hence, it is not going too far to affirm that all cures brought about by compounds that are inert, by electrical contrivances that produce no current, by the laying on of the human hand, or any other trick of ma-

terialistic quackery, are faith cures, pure and simple. And with this fact established, it is obvious that the so-called diseases over which the wonder-working charlatan triumphs so signally, are not diseases at all, but merely symptoms of the various functional nervous disorders already discussed.

In spite of these facts, some gullible individuals carry their faith in the trumpery of the charlatan so far as to pay the penalty of their folly with their lives. Performances of this sort are of questionable heroism, but it cannot be denied that they do help somewhat in the elimination of the unfit. It is a very different matter, however, when people are imbued with this faith to such an extent that they are led thereby to sacrifice the lives of helpless children or of the equally helpless aged. In the author's opinion such people are guilty of nothing less than the crime of murder, for which they are surely answerable to God, if not to man.

To the reader who has followed the foregoing exposition of quack methods, it is

plainly evident that the star rôle is played by self in all cures attributed to such methods, just as it is in the cures of Emmanuel and New Thought. It must also be evident to him that if people had the same faith in themselves that they have in the nostrum vender and the exponents of commercialized religion, and pursued the common sense methods of combating functional nervous disorders suggested by medical science, they would have the moral satisfaction of achieving a cure, without becoming the stultified dupes of designing frauds.

One of the fundamental principles laid down by medical science is that disorder in any form cannot be successfully combated without a preliminary understanding of its nature and causes. On this principle, and for the benefit of those who desire, by rational methods, to rid themselves of the incubus of functional nervous disorder, the nature and causes of this deplorable form of affliction will next be considered.

CHAPTER VI

THE NATURE AND CAUSES OF FUNCTIONAL NERVOUS DISORDER

It is not the author's intention to enter into a technical discussion of what takes place in the nervous system, when the harmony of its functional activity is replaced by discord. Such a course would serve to confuse the reader rather than to enlighten him. And, after all, for the practical purpose of working out a cure, it is enough for him to know that this discord results from an unnatural tendency to exhaustion, with consequent irritability, on the part of the elements of which the nervous system is composed. With regard to causation, however, the situation is altogether different. This subject is important in its entirety, and its every aspect should be carefully studied and reflected upon.

In a general way, the causes of functional nervous disorder may be divided into two classes—the predisposing and the direct. And most prominent among the former is heredity. Statistics show that many a victim of disordered nerves numbers among his antecedents, either immediate or remote, certain definite types of defectives—such as the insane, the eccentric, the alcoholic, the syphilitic, the tuberculous and the gouty.

Here let it be stated that some writers contend that similar statistics might be gathered with regard to the ancestry of many people whose nervous systems are in every way normal, and argue from this that the emphasis commonly laid upon heredity as a factor in the causation of functional nervous disorder is misplaced.

The trouble with such a contention is that the statistics necessary to support it are not at hand. Nevertheless it raises a point which deserves consideration. There are no doubt many individuals who manage to preserve their stability, in spite of the fact that they come into the world

with the burden of an inborn tendency to nervous breakdown heavy upon them. But such cases in nowise tend to lessen the importance of heredity as a predisposing cause. They merely illustrate the counteractive possibilities of environment, education and certain other factors which will be given special consideration later on.

Most readers, even though they be unversed in medical matters, will have no difficulty in appreciating the possibility of a causal relationship between the insanity of one generation and the functionally unstable nervous organization of those that follow. But without some explanation the connection between the alcoholism, syphilis, tuberculosis or gout of an ancestor and the disordered nerves of certain of his descendants may not be so clear.

To state the matter plainly, this quartet of chronic diseases, above all others, is peculiarly liable to afflict mankind at a time when the procreative tendencies are strongest. Three of the four—syphilis, tuberculosis and gout—tend primarily to reproduce themselves in offspring, but this

tendency may be so lessened, in course of time, by treatment or by the admixture of healthy blood, that direct transmission ceases. Nevertheless, the entire four, even in their least virulent form, exert a tremendous devitalizing influence, particularly upon the highly organized tissues of the nervous system. And, as like begets like, the descendants of persons thus afflicted are apt to come into the world so poorly organized nervously that they break down under slight provocation.

In many cases the seeds of nervous breakdown are sown in very early life. Through the ignorance of nursemaids, parents or guardians, vivid impressions of a terrifying or otherwise obnoxious nature are constantly made upon the child mind, which sadly interfere with the firm up-building of character so essential to the stability and functional harmony of the nervous system.

The child who is continually frightened into submission by threatened invocation of the aid of the police or of some mythical evil genius of darkness, who is sharply

reproved for every noisy manifestation of animal spirits, who is entertained with stories of ghosts and robbers, who is taught to look upon God as a Being without compassion for the delinquencies of His children, and who is constantly within ear-shot of domestic bickerings or hypochondriacal complaints, runs a tremendous risk of developing a flabby personality. The same is true of the child who grows up in an atmosphere where everything possible is done to foster an inborn idea of self-importance; where altruism is unknown; where caste counts for everything, personal merit for nothing; and where spirituality is submerged beneath aspiration for social or financial supremacy. In either case the moral fiber is alarmingly apt to become so flimsy that the first rude contact with the actualities of every-day life is likely to produce a nervous perturbation which may last for years in spite of intelligently directed treatment coupled with much painful personal effort.

Before the age of puberty there is very little danger that any child will contribute

to its own nervous downfall by over-study in school. Its natural propensity to playfulness and inattention is a safeguard against any such calamity. But many parents, failing to take the cue from Nature, insist on thwarting her beneficent efforts by requiring their reluctant offspring to not only devote more time to their studies than is necessary, but also to spend several nerve-racking hours daily in practice upon some musical instrument.

Predisposing causes of a purely physical order are not as numerous or as perniciously active in early childhood to-day as they were a quarter of a century ago. Some very young children are still given such rank nerve poisons as tea, coffee and alcohol, by ignorant parents of the poorer classes, but popular medical instruction has done much to lessen this evil.

The public school is no longer a breeder of nervous exhaustion. On the contrary it is often there that physical causes acting in this direction are first checked, and hygienic principles inculcated which serve

to keep these causes permanently in abeyance.

From the age of puberty up to the time a youth or maiden reaches majority, over-study is the predisposing, as well as the direct, cause of disordered nerves in a certain number of cases. But it is a cause of minor importance in every way as compared with certain experiences that may be undergone at the time when the sexual instinct begins to intrude itself forcibly upon consciousness.

Certain German authors of high rank, men who have investigated the subject with unwearied patience and scientific zeal, declare, in all sincerity, that most, if not all, cases of functional nervous disorder in the first half of life are traceable, either directly or indirectly, to some disturbance in the sexual sphere—the term “sphere” being used in its broadest sense.

A sweeping statement of this sort is unlikely to meet with general acceptance, but there is enough truth in it to warrant a somewhat fuller treatment of the subject

than is usually met with in books designed for popular reading.

Through the ignorance, indifference or mawkish sentimentality of parents, many a youth comes into the possession of procreative powers, the physical, mental and moral significance of which he understands nothing. If he is of vigorous bodily habit and, at the same time, clean-minded, he may for a long time resist Nature's promptings. But Nature is imperious, while instinctive morality is at most only rudimentary and puts but a feeble check upon an organic longing. Under such conditions the habit of self-pollution is easily established. Once established, it may be continued for years; and, indeed, without perceptible detriment to mind or body. In the generality of cases, however, there comes, sooner or later, a rude awakening. Through the talk of ignorant lay acquaintances, or far worse still, through the unspeakably pernicious literature which is scattered broadcast by the most ruthless of all human vultures, the "Lost Manhood" quacks, the victim of the habit be-

comes obsessed with the idea that he has ruined himself mentally and physically. Even in cases where no such habit is formed, and the youth experiences nothing worse than nocturnal pollutions of varying frequency, it is instilled into his mind by these same fiends that this perfectly natural phenomenon leads inevitably to equally terrible results. In consequence of this disingenuous enlightenment real evils, such as worry, anxiety, introspection and self-analysis, spring rapidly into existence and make easy the descent into the hell of disordered nerves.

In the case of the girl the situation is different. If she is not properly prepared for its advent, the first menstrual epoch may bring with it an emotional crisis which may recur with each successive epoch. This is particularly apt to be the case if, by reason of local peculiarities or defects, there is much attendant pain and discomfort. And these recurrent emotional storms, through the accompanying wear and tear upon the nervous system, are, of

themselves, capable of producing severe functional disorder.

In many cases, however, where such disorder is led up to by disturbances in the sexual sphere, the problem of causation is more complex. The innate modesty of the girl puts a far more powerful check upon the promptings of Nature to sexual gratification than does that of the boy. Nevertheless, these promptings are, in certain cases, overmastering and the habit of self-pollution is established. In other cases they are thrust by effort of the will into the background of consciousness. But even there they may continue to exert a disturbing influence upon the emotions, the exact nature of which the girl herself may not understand. And in a final group of cases, in which the emotional stability is primarily disturbed by some lewd proposal, or by a lascivious kiss or touch, precisely the same situation obtains. Here again strong effort may be made to submerge the train of ideas aroused by the upsetting experience, and the effort may be crowned with apparent success. But psy-

chologic methods of analysis reveal the fact that, though submerged, these ideas continue to keep up automatically a condition of emotional unrest.

These last three groups of cases show clearly the complexity of the subject of predisposing causes within the sexual sphere. However, it may be said that constant emotional disquietude is always the factor which occasions the wear and tear, and thereby heightens the susceptibility of the nervous system to the influence of other factors more immediately responsible for the final breakdown.

Life between the ages of puberty and maturity is fraught with still further menaces to nervous stability, and among the more common are the tea, coffee, tobacco and alcohol habits, in all of which the balance between nervous waste and repair is constantly disturbed. This balance is likewise disturbed by either work or pleasure-seeking, whenever the one or the other constantly interferes with sound nightly sleep of nine or ten solid hours.

In many cases among adolescents of both

sexes who are forced to work for a living, the nervous system is severely taxed by occupations which do not encroach upon the natural sleeping-hours, yet entail long confinement daily, with incessant demands upon the mental and physical activities, in an environment that is bad physically and still worse morally. Moreover, in these cases the nervous strain of toil is, unfortunately, frequently enhanced, rather than relieved, by improper nourishment and by home conditions that are in every way odious.

Among adolescents of the higher social strata the drain of daily life upon nervous vitality, while of an entirely different order, is, in many ways, none the less serious. For the girl who is popular there is the eternal round of dances, theater and house parties and other forms of social activity, which make such severe demands upon her physically and emotionally that, by the time she "comes out," her fund of nerve force is often at a low ebb.

Even for the unpopular girl or, in the expressive *argot* of modern youthful so-

ciety, the "pill," social life is equally nerve-racking. She also is bidden to the various functions of the elect, but only to be made the conspicuous victim of a neglect that is too often palpably offensive. Where she seeks pleasure, she encounters only disappointment and humiliation. And her sensibilities are so repeatedly wrought upon that, in the end, she is brought dangerously near to the point of actual breakdown.

The boy who belongs to this same walk of life is also exposed in many ways to influences which tend to undermine his nervous forces. His social life is of a like devitalizing order, and, in addition, he is frequently led into a further dissipation of his energies by an ambition to excel in competitions of physical endurance, which entail great emotional stress. The result is that, from the combined drain of study, social activity and athletic contests, such a boy is very apt to enter the arena of life with a nervous system already so over-taxed that it breaks down functionally directly any unusual strain is put upon it.

So much for the predisposing causes. We now come to a consideration of those that may be held immediately responsible. On this score certain writers, both lay and medical, attempt to dispose categorically of what is, in reality, a complex problem, by holding the general strenuousness of modern American life alone to blame for all cases of disordered nerves.

This off-hand way of settling the responsibility appeals powerfully to the popular imagination, but, unfortunately, it is not strictly warranted by the facts. Functional nervous disorder is neither a distinctly American affliction, nor is it a product of recent times. Retrospective diagnosis, based on historical data, shows that, in one or another of its various aspects, it has existed among civilized peoples from an early date. And we have, in the Salem Witchcraft episode, a painful reminder of its presence in this country, in epidemic form moreover, as far back as the beginning of the seventeenth century.

In our own day weak and irritable nerves are to be found not only in large

cities and towns, where life's current flows most swiftly and tumultuously, but also in villages and hamlets which hold nothing but its eddies and backwaters; and with due allowance made for difference in population, nerves of this sort cannot be said to preponderate in the former.

According to the above-mentioned writers, the glare and din of the modern metropolis are supposed to possess special nerve-shattering properties; but this again is a fallacy. The average city dweller soon becomes inured to his environment, and the sights and sounds which accompany human activity make little or no impression upon his consciousness.

Foot-travel across crowded streets does, to be sure, involve a more or less constant menace not only to nervous stability, but also to life and limb. This is due mainly to the tendency shown by certain chauffeurs and truck-drivers to exhibit sudden homicidal impulses. But most people nowadays who essay to cross a city street are thoroughly aware of the danger involved and govern themselves accordingly. And,

after all, the danger that is known, the flash and flare of myriad lights, the clanging of trolley gongs, the tooting of automobile horns, the shrieking of sirens and the general clatter and turmoil of traffic are far less disturbing to the city dweller's nerves than the unknown dangers which seem to him to lurk at every turn of a lonely country road, where, at night, the impenetrable darkness is emphasized rather than relieved by the ghostly flicker of infrequent lamp-lights, and nothing but the voices of Nature break the stillness.

Properly defined, the strenuous life is merely one of strong effort and exertion. And strong effort, rightly controlled and directed, never occasions undue wear and tear upon the nervous system. On the other hand, what may be termed the super-strenuous life—a life in which the energies of mind and body are incessantly exerted to their utmost under conditions that evoke emotional reactions of the most depressing character—will, in time, raise havoc with the strongest nerves. But inasmuch as certain breakdowns occur among people

who know nothing of the strenuousness of life except through the medium of the public press, while others take place long before the real battle for existence has fairly begun, the reader will readily agree that no one direct cause can possibly be settled upon, which will account for every case.

As a matter of fact, in the present writer's experience, cases of nervous breakdown in which neither hereditary nor acquired predisposition is discoverable are very rare indeed. So that, for the most part, causes which are held to be direct—notably exhausting illnesses of all kinds, surgical operations upon the appendix or upon the reproductive organs, and severe and protracted childbirth—do little more than to precipitate the disaster.

In the small percentage of cases, in which persons entirely free from hereditary and other predisposing influences acquire weak and irritable nerves, the causes are neither numerous nor far to seek.

Much unwarranted stress is commonly laid upon the danger to nervous stability that is supposed to attach to vocations

which involve intense mental or physical application. In reality, the nervous system is never thus depleted of its forces if due heed is given to even the most elementary laws of hygiene and the reaction of toil upon the individual's consciousness is a pleasant one. Depletion follows only where such common physical needs as nourishing food, pure air, sunshine and sleep are practically neglected, and the energies of mind and body are incessantly bent upon some daily task whose chief emotional reaction is worry.

In last analysis, the most important factor in the direct causation of nervous exhaustion is the emotional life of the individual. Where worry is the dominant note breakdown is practically inevitable, but there are other emotional states which, if persistent, will produce the same result.

People who live in isolated places are apt to succumb nervously to the mere tedium of existence. In such cases, however, it is only fair to say that the climax is often hastened by dietetic and hygienic conditions which are abominable. But, after all,

ennui is the element chiefly responsible for the breakdown, as is abundantly proved by the fact that it is also chiefly responsible in the cases of many among the so-called idle rich, who lead a life in which the dietetic and hygienic conditions are above criticism.

Oftentimes it is unnecessary to go beyond the domestic circle in search of the exciting causes of the emotional state which exhausts the nervous vitality. The grief which follows a break in the family group through death or marriage, or the anxiety occasioned by the precarious health, the prolonged absence or even the dissolute habits of one of its members is frequently enough to bring some other member low.

In many instances this same result obtains where husband and wife alone constitute the family, and where none of the above-mentioned causes of grief and anxiety enter into the question. In ninety-nine cases out of a hundred, under such circumstances, it is the wife who develops "nerves," and the causal emotional state

as well as the factors giving rise to it are seldom easy to define. There may be no dissatisfaction with material surroundings, no real jealousy, no consciousness of palpable neglect. Nevertheless there is always a something in the marital relations which, through the resultant emotional tumult, leads inevitably to nervous disaster.

After all, if the author were compelled to name the one emotional state which is the most frequent cause of weak and irritable nerves among humanity at large, he would unhesitatingly fix upon worry.

Money is said to be the root of all evil, and certainly, in a very large number of cases, it is the root of the worry-evil which overthrows nervous stability. But the worry-evil is one of so many roots that it would be a hopelessly endless task to attempt to expose them all to view.

From what precedes it must be obvious to the reader that the length of time required by any cause or group of causes to bring about the final disaster depends upon the individual susceptibility. Once the

disaster is accomplished, however, symptoms spring into existence in rapid and bewildering succession. These symptoms are of two orders—physical and mental—and to each a separate chapter will be devoted.

CHAPTER VII

THE BODILY SYMPTOMS OF FUNCTIONAL NERVOUS DISORDER

When a person who ordinarily enjoys good health is suddenly stricken with some one of the transient and commonplace ailments to which humanity at large is liable, the emotional reaction is, as a rule, neither pronounced nor lasting. The abrupt change from health to illness may, at the outset, occasion a certain amount of apprehension, but the emotional balance is quickly restored when the sick person comes to realize that there is nothing subtle or mysterious about his ailment, that his suffering is the result of material causes acting in a material and objective way, that within a more or less definite space of time these causes will cease to be active and that the end of his troubles will then be in view.

As a consequence he finds nothing startling in the character and distribution of his symptoms, forgets his pain directly it is gone and looks upon the debilitated condition in which he is left as a natural, but merely temporary, result of what he has been through.

In nervous breakdown, on the other hand, the situation is entirely different. In the great majority of cases the change from a feeling of well-being to one of ill-being is gradual, and the outward and tangible evidence of the symptoms complained of may be so slight as to escape detection except by a specially trained physician.

This condition of affairs is very perplexing to the victim of the breakdown and when, after a more or less prolonged experience with his disorder, he discovers that the disappearance of a given symptom or group of symptoms is no guaranty against its return, his mystification and terror are complete.

Unless he is properly enlightened at this point the constant recurrence of distressing symptoms—for whose description he

finds even the most hyperbolic language inadequate—serves to settle his conviction that he is the victim of some subtle and mysterious ailment, which is slowly and insidiously working his mental and physical destruction without producing any marked outward evidence of its deadly action.

Unfortunately, in many cases, such a person does not get the proper enlightenment, even from physicians, in this time of need. He is merely told that there is nothing the matter with him or that he has no organic disease—that his trouble is largely one of the imagination—that he must go right ahead and forget it. And the sole effect of this clumsy disposal of his case is the addition of anger and distrust to the stock of depressing emotions which are robbing him of his nervous forces and his peace of mind.

What the physician fails to appreciate in the premises is that it is not the intensity of any particular symptom—pain, for example—that gives rise to the suffering, but rather the dread and anxiety, which come from a complete lack of understand-

ing of the cause and meaning of the repeated appearance and disappearance of seemingly unrelated symptoms in the most widely separated parts of the body and limbs.

Now, if the sufferer were given an insight into the subject of the physical properties of nerves, and if it were made clear to him just what may happen when the physiologic functions of the nervous system as a whole are inverted, the veil of mystery which ordinarily enshrouds his case would be lifted, and the major part of his suffering averted.

With regard to the physical properties of nerves the important fact to be borne in mind is that the resistive powers of the different elements which make up the nervous system vary in degree with the nature of the functions these elements are designed to perform. For example, the motor nerves, so-called, which have to do with voluntary action, are less susceptible to the influence of vitality-depleting agents than the sensory—upon which we depend for feeling; while the latter are superior,

in respect to their resistive powers, to the great sympathetic which, through its many ramifications and connections, is largely concerned in the so-called automatic functions of the body—such as respiration, circulation, digestion and so forth.

Given this fact, it is easy to understand why, in states of nervous exhaustion, the bulk of the physical symptoms should come from those organs over which the sympathetic holds sway. And when we consider that certain of these organs lie at considerable distances from one another within the body, the simultaneous existence of symptoms which are correspondingly distant should occasion no surprise.

Attention has elsewhere been drawn to the fact that nerves which are weak are also irritable, and it now remains to describe in detail the various ways in which this weakness and irritability manifest themselves physically. It must not for a moment be inferred, however, that the symptoms which follow appear in their entirety or, indeed, with the same degree

of intensity, in every case. Certain ones, to be sure, are constant, but the presence or absence of many is determined in the particular case by the degree of exhaustion and by such other factors as age, sex, nationality and environment. In making the list as complete as possible the author has in mind the tendency of the nervously-weak person to pounce upon some—to him—important omission and to conclude therefrom that the symptoms do not fit his case and that the treatment suggested is, in consequence, valueless.

First to be considered are the symptoms which may arise when the vitality of the motor nerves is impaired. In certain extreme cases—which are very rare nowadays—the sum total of muscular power may be so slight that the victim cannot rise from the bed or even turn over in it without assistance. In other cases, equally extreme and rare, all voluntary movements can be executed separately with vigor while the subject is recumbent, and yet both standing and walking are impossible because the motive power at command cannot

be so utilized that the muscular "team work" requisite for these acts may be accomplished.

In the generality of cases motor insufficiency makes itself manifest by a feeling of tire. The sufferer rises more or less exhausted in the morning, and his exhaustion tends to increase until late in the afternoon, when, curiously enough, his "batteries" usually begin to "pick up," and by the time dinner is over he feels somewhat as a well person does after several hours' rest.

In ordinarily severe cases standing and walking are not impossible, yet both are irksome and the sufferer is often compelled to lie down after indulging in either for any length of time. When such a person desires to sit down he invariably avoids, if possible, a stiff-backed chair and takes by preference a rocker. In this he sits limply, owing to the weakness of the spinal muscles, and, yielding to a feeling of motor restlessness, shifts the position of his limbs frequently and rocks incessantly. When he has to stand for any length of

time his tendency is to lean against the nearest available object, and to keep his feet wide apart in order to broaden his base of support. With regard to walking, it is interesting to note, in connection with cases of this severity, that the fatigue involved is probably due to the output of energy required in sustaining the weight of the body rather than to that called for by the actual progression. This is shown by the fact that the sufferer can ride a bicycle for several miles with much less weariness than he would experience from a walk of two or three blocks.

If the victim is a woman, she finds that her arms tend to fall limply to her sides after she has kept them for a few minutes in the position assumed in doing up the hair. In both sexes any form of activity which involves the coördinated use of certain muscles quickly brings on a feeling of exhaustion in these muscles. Thus, the throat feels tired and the voice becomes husky and broken after a short conversation, the jaws grow weary during the progress of a meal and the muscles used in

writing soon betray their fatigue to such an extent that a letter which begins with characters that are firm and legible often ends in an illegible and disjointed scrawl.

Such are the manifestations of motor nerve weakness. And we have now to consider those of the irritability which goes hand in hand with it. From this source come the commonly experienced feeling of muscular tension, the intermittent twitching of certain muscles—notably those about the eye and mouth—the sudden jerking of the legs, which occurs just as the sufferer is dropping off to sleep, the marked general tremulousness which accompanies an emotional crisis and the local tremors which follow the concerted action of groups of muscles.

In cases of lesser severity the manifestations both of weakness and irritability very naturally decrease in number and intensity. And in rare instances, where the resistive powers of the motor nerves are sufficiently great to withstand the wear and tear completely, they are entirely absent.

Next in order for consideration are the

signs by which perverted function of the nerves of common and special sensation may make itself manifest. These on account of the lesser resistive powers and the far more diversified character of the functions subserved by the nerves in question, largely exceed, both in intensity and number, those which spring from the motor disorder.

The nerves of special sensation most commonly affected are those of sight, hearing and taste, and as there is nothing to be gained by distinguishing between symptoms of weakness and those of irritability, no attempt will be made to do so.

One of the commonest complaints of nervous sufferers is that when they have read for any length of time—particularly with artificial light—the eyes grow tired and ache, a mist comes over them, the print blurs and the lines tend to run together. The occurrence of specks before the eyes is also often complained of, although it is not a symptom peculiar to the nervous.

A not uncommon source of great annoyance are the so-called negative images

which appear to sufferers under certain conditions. Such people complain that if, after gazing for a time at an object presenting marked contrasts of light and dark parts, the eyes are turned toward a shaded space containing nothing conspicuous, they see a transient image of the object, in which the light and dark parts are reversed.

Herbert Spencer calls attention to this annoying phenomenon in his *Principles of Psychology* and explains it by saying that those portions of each retina upon which strong light has fallen, together with the answering portion of the optic centers, having undergone the maximum of change with corresponding production of the maximum of feeling, are the next instant less capable of undergoing change and evolving feeling than the portions upon which the feeble light has fallen; and hence, when they are together exposed to the same feeble light, the unexhausted parts appreciate it more than the exhausted parts, and a negative image results.

The length of time these negative im-

ages last varies greatly in different cases, but if the nervous exhaustion is marked, they may be so persistent that if a series of objects is passed before the sufferer's eyes, in such a way that only a momentary view is obtained of each, the negative image of one is apt to interfere with and confuse the positive image of the next, and no clear view is obtained of any.

In certain cases it is complained that at times objects look very large or very small. This phenomenon is apt to appear and disappear rather abruptly, and its first appearance in a given case generally causes much needless alarm and apprehension.

The same alarm and apprehension are also occasioned by certain illusions, sometimes experienced in broad daylight when the subject is under no special mental stress or excitement. Looking up suddenly he thinks he sees somebody entering the room or passing the door, an animal running across the floor, or some winged creature making its way through the air. The impression is but momentary, and the objects thought to be seen are seldom in

themselves terrifying, but the first experience of this sort is likely to arouse the comforting feeling that the mind is surely giving way.

On the side of the auditory nerves the most distressing symptom is *tinnitus aurium*. Literally interpreted, *tinnitus aurium* means a ringing in the ears, but ringing is only one of the many sounds that may be heard. Others are buzzing, roaring, hissing, shrieking, blowing, whistling, bubbling and so forth. In many cases all these sounds are absent, but the subject is still greatly annoyed by hearing the beat of his pulse in the ear when his head is on the pillow.

In the reaction to outside noises various peculiarities are exhibited. Certain sufferers cannot bear any sound whatsoever; others are distressed only by little sounds whose exact origin they cannot trace; while for others still the loud varieties are alone discomposing.

During the crises of anxiety, which occur in functional nervous disorder, the voices of those about sound to the sufferer

as though they were miles away. - And after a hysterical attack the hearing may be temporarily diminished or lost in one or both ears. Here, however, the disturbance is not really in the auditory nerves, but results from a cutting off of the hearing center in the brain from the general field of consciousness. An intermittent feeling of fulness in the ears in another annoying symptom not infrequently complained of. Here again the trouble is not in the nerves proper, but is probably due to a closing of one or both of the passages, known as the Eustachian tubes, through which the eardrums connect with the back of the throat.

With regard to taste, the commonest complaint is that all food lacks savor, but certain sufferers go so far as to say that they literally cannot distinguish between bitter or sweet or between hot and cold substances placed in the mouth. In practically every case the tongue is coated, and in many there is a bad taste in the mouth itself.

We come now to the manifestations of weakness and irritability on the part of

the nerves of common sensation. Through these nerves, as stated in Chapter I., the brain is in instant communication with every part of the body; hence, we may look for the signs of their disordered activity at any point from the crown of the head to the soles of the feet.

The most ominous and terrifying to the sufferer are the sensations experienced in and about the head itself. They are invariably interpreted by him as forerunners of some fearful calamity—such as apoplexy or insanity—and do as much to render his existence a burden as all his other symptoms combined.

Pain in the head is very frequently experienced, but it is seldom intense, although certain hysterical persons complain that they feel at times as if a nail were being driven into the brain. The common complaint is of a dull, nagging ache together with a sense of pressure. In certain cases there is a constant feeling as though the head were weighted down by a heavy helmet, or as though it were itself too heavy for the shoulders and tended to fall back-

ward. Oftentimes there is a sensation of burning in the scalp, and the area involved actually feels hot to the touch. Many other annoying sensations in this region are also complained of, notably a feeling as if the scalp were drawn tightly over the skull or as if it were encompassed by a constricting band.

The list of sensations referred to the interior of the skull is far too long to reproduce in its entirety, but the most familiar are those of fulness, emptiness, lightness and heaviness.

It is important to note that practically all these uncomfortable feelings, whether they appear to emanate from the scalp or from within the skull, are increased by mental application. The sufferer, with his exalted faculty of morbid self-analysis, is usually wide awake to this fact and, as a rule, the observation serves to settle his conviction that his mental stability is seriously threatened.

Another source of great distress and suffering is the spine, which, by reason of the weakness and irritability of the many

sensory nerves clustering about it, is liable to be tender to pressure, and, at times, exquisitely so. In severe cases this tenderness may extend over the entire length of the spine. It may be so acute that even the weight of the clothing is unbearable, and the sufferer cannot sit down without an air cushion under him. In cases of lesser severity the upper and lower extremities of the spine may alone be sensitive, and from the latter situation the sensitiveness may extend into the hips.

Over the trunk, sensory nerve irritability is usually manifested by a like sensitiveness to pressure in circumscribed areas which are fairly uniform in their distribution. These tender areas are generally found in the spaces between the ribs, under the breasts, at the pit of the stomach and in the groins. At times, moreover, the sensory irritability may become so pronounced that sharp, darting pains of a neuralgic character may appear in a great variety of situations, not only in the trunk but also in the extremities, and give rise to

the fear that actual nerve inflammation is present.

One of the most tormenting sensations experienced in the extremities proper is that of tingling and numbness. If the sufferer rests his elbow on a hard surface for a minute or two the ring and little fingers, together with the corresponding border of the palm, "go to sleep" as the expression is. The same sensation is often experienced the first thing on awaking in the morning. In the latter case all four extremities may be involved. The trouble is directly traceable to certain nerves—the ulnar in the case of the hands and the peroneal in that of the feet—whose nearness to the surface of the limbs renders them peculiarly liable to pressure during sleep.

Sensations of a less disagreeable character are also frequently felt in the extremities. These are of various orders, but the most common are thrilling and bubbling.

One of the most curious perversions of feeling occasionally experienced is that the hands have suddenly become of enormous size. This sensation is always transitory,

is never accompanied by any outward sign, and, strange to say, is not altogether unpleasant.

Owing largely to the over-susceptibility of the sensory nerves nearly all sufferers have a pet aversion to contact with certain substances. Some cannot endure to touch things that have smooth surfaces, such as porcelain articles and certain buttons, while others are greatly upset if they have to handle a piece of silk or the skin of a peach. Examples of this aversion might easily be multiplied. The individuals who suffer from it also complain that the pulps of the fingers become very tender when the nails are trimmed at all short.

We come now to the third and final group of bodily symptoms—that contributed by functional disorder of the great sympathetic system of nerves. From this system come the tiny nerve twigs which lie along the blood vessels and regulate the circulation in the various parts of the body and limbs. And so long as these little automatic regulators do their work properly, an equable temperature is maintained

throughout the entire surface of the skin, the body and extremities present just the right degree of warmth to the touch, we feel a comfortable glow all over and offer the maximum of resistance to the action of external cold.

On the other hand, when these same nerves are weak and irritable they are peculiarly over-susceptible to atmospheric conditions. Their possessor finds himself chilled and uncomfortable whenever the temperature, within doors or without, drops ever so slightly below summer heat. He finds also that he cannot expose himself to the slightest draught of air without almost immediately experiencing such precursors of a cold in the head as sneezing and profuse nasal secretion. In the first case the atmosphere acts upon all the nerves (which, by the way, are called *vasomotor* nerves) of the surface vessels, and causes them to contract so that the flow through the skin of warmth-bearing blood is checked. In the second case the action is directly upon the vasomotors of the mucous membrane of the nose.

Again, if the victim of vasomotor irritability goes directly from an atmosphere in which he feels chilly into one which is at all hot, he finds himself, in a very short time, equally uncomfortable. Here, under the influence of the heat, the nerves in question allow too much blood to flow to the surface, with the result that the ears grow red and hot, the face and extremities tingle and burn, and the demand for an open window becomes, in every way, imperative.

Even under the most favorable atmospheric conditions a weak and irritable vasomotor nerve system produces surface manifestations that are distinctive. To it are attributable the sudden and intense flushings and pallors to which the nervous invalid is so peculiarly liable. Indeed, the constant pallor, which is so commonly present, is more often traceable to this source than to any actual blood impoverishment.

Among its other surface symptoms are the cold, mottled and perspiration-bathed extremities, from which every nerve-weak individual almost constantly suffers; the dead fingers, so-called, and the black and

blue spots which appear spontaneously in circumscribed areas over the surface of the extremities, particularly the lower. These two latter phenomena, although transitory, are very startling to the sufferer. They occur much more commonly in women than in men, and the black and blue spots, which vary greatly in size, are generally accidental discoveries. The *dead finger* phenomenon, on the contrary, is usually ushered in by a feeling of constriction in one or more digits which quickly grow as cold and white as marble.

In cases where the spasm of the skin vessels caused by this vasomotor irritability is protracted for a certain length of time, a local swelling may occur. This is due to a leakage into the tissue beneath the skin of the watery contents of the blood. When the local circulation rights itself the swelling disappears.

All these phenomena show very clearly how independent the surface circulation is of the main blood currents of the body. And if the sufferer will bear this fact prominently in mind it will relieve him, to a

large extent at least, of the fear of heart trouble which the appearance of such phenomena is very apt to excite.

There still remain for consideration the numerous and diversified symptoms which spring from weakness and irritability on the part of those portions of the great sympathetic system of nerves which control the various glands and organs of the body. One of the most striking characteristics of these symptoms is that at times they show the functional activity of the affected glands and organs to be practically at a standstill, while at others it is annoyingly excessive.

Illustrations of this point are numerous. The sufferer finds that at times, notably during periods of excitement or apprehension, the glands which secrete the saliva fail absolutely to work, and in consequence the mouth is dry and parched. During sleep, on the other hand, the salivary secretion may be so active that actual drooling occurs.

The same conditions frequently prevail throughout the entire digestive tract. The

stomach may secrete the gastric juice so abundantly that a constant gnawing in that region is felt, and a sour, burning fluid keeps coming up into the mouth. Then again, this juice may be so small in quantity and so slightly acid that food taken into the stomach may lie there for hours unchanged by it. The intestines betray a like capriciousness of action, with the result that constipation alternates with frequent loose discharges which often contain mucous casts of the bowel.

Ordinarily the picture of what is commonly termed "nervous dyspepsia" is as follows: The appetite is very variable and depends in large measure upon the state of mind. In any case it is of slight consequence whether much or little is eaten, for the victim goes about at all times with the sensation as if a lump of lead were firmly lodged in the pit of the stomach. He is painfully conscious of what he has eaten, from the time the first mouthful is swallowed until the waste products of digestion are eliminated from the bowel. Gas in the stomach and intestines he has with him

always, in spite of repeated eructations and the frequent passage of flatus. And he often goes to the table with the feeling that even a swallow of water must inevitably cause him to burst.

After the stomach contents have been, at least in part, slowly and painfully pushed along, the small intestine becomes the next stage in the Calvary of digestion. Here the imperfectly converted food seems to do little more than to undergo fermentation and give off gas which either distends the abdomen as a whole and causes a general feeling of misery in this region, or gathers under compression in certain loops of the intestine and causes acute localized pain.

The passage of the waste products through the first two portions of the large intestine is generally effected without noteworthy difficulty, but in the last segment peristaltic activity comes to a standstill and constipation results.

Nor is this the whole picture. The gas-distended stomach and intestines tend to press up against the diaphragm and en-

croach upon the territory of the heart and lungs. From this tendency come the irregularities in the force and rhythm of the heartbeat, the difficulty in getting a long breath, the frequent sighing and the dread of something about to happen, with which every nervous dyspeptic is only too painfully familiar. Sometimes this stomach and bowel distension occurs in the middle of the night, and the victim awakes to find himself weak and bathed in perspiration, his heart beating like a trip-hammer and his breathing embarrassed. Instantly the feeling comes over him that he is dying, and this terrifying impression lasts until a considerable portion of the accumulated gas is in some way got rid of.

In addition to all this there is usually a constant feeling of tenderness to pressure either in the pit of the stomach or along the border of the ribs on the left side. And the only time the sufferer really experiences anything that approaches a feeling of comfort in these regions is when he is entirely free from the constriction of clothing about the waist.

The lower end of the left flank is also very apt to be the seat of more or less constant pain and discomfort. This is caused by constipation and gas accumulation and when these latter are at all marked the pain radiates from the flank into the hip-joint, the joint between the spine and the left hip-bone, the groin and the adjacent parts on this same side as far down as the middle third of the inside of the thigh. With the pain there may be numbness and tingling of the toes of the left foot, and while the pain lasts the act of rising is difficult and the first few steps are taken limply. This leads to the erroneous conviction in the mind of the sufferer that rheumatism has been added to his already long list of ills. The real danger is a sort of anti-climax to what is feared, being nothing more than a tendency to the formation of hemorrhoids.

The nervous dyspeptic is at the same time very apt to be a poor assimilator, and if his digestive trouble has existed for a long time the outward signs of his suffering are plainly manifest. He is consider-

ably below the normal weight for an individual of his age, sex and height. His face is sallow and heavily lined, his cheeks and eyes are hollow, and he bears with him at all times and in all places an air of intense and settled gloom.

Variation in the force and rhythm of the heartbeat sometimes occurs when there is no gaseous distension of the bowel. The pulse of the nervous person is generally quick and of low tension at best. Moreover, it not infrequently skips a beat, causing an involuntary swallowing movement in the back of the throat and a sensation as though the heart turned over in the chest. In certain cases there are periods of many weeks' duration in which it rarely falls below 120 beats to the minute during the waking hours. In practically all cases there are times—and they are anxious ones for the sufferer—when the beat at the wrist seems to vanish completely. There are still other times when, at various points over the body and limbs, there is felt a throbbing in unison with the heart.

Next for consideration are the signs by

which the kidneys and bladder betray the effects of sympathetic nerve weakness and irritability. This is not a lengthy matter. The urine varies in color, concentration and amount. If no great quantity of fluid is being taken into the system and at the same time the assimilation of food is defective, it will be high-colored and concentrated, and will, on cooling, deposit the so-called brickdust sediment. When it is but slightly acid it is very apt, after standing for a time in a cold room, to contain a bulky opaque white deposit of earthy phosphates. Both these deposits are frequently, although erroneously, regarded by the nervous as evidence of actual kidney disease, and cause much needless worry and apprehension. An emotional crisis is usually followed by a copious voidance of a pale watery urine.

The bladder is often intolerant of the presence within it of even small amounts of urine. From this results the frequent desire to urinate, so commonly experienced by the sufferer, both day and night. During times of mental stress this desire be-

comes both painful and imperious. In certain cases there is a constant feeling as if the bladder never fully emptied itself. This compels the victim to have very frequent recourse to the toilet and seriously interferes with vocational and social activities.

The reproductive organs are also to be reckoned with. Through sympathetic nerve weakness and irritability the menstrual flow may not make its appearance for months at a time, or it may appear with undue frequency. It is at times profuse and at times scanty. When the latter condition prevails it is apt to be associated with unusual pain and general discomfort.

With the male sufferer the situation is much more disturbing. The genital organs are often cold, flabby and shrunken. The desire for sexual intercourse is materially diminished, and when coition is attempted, the result is generally a dismal failure. On the other hand, nocturnal pollutions are frequent.

The action upon the mind and emotions

of these many and diverse physical symptoms is constant and noteworthy. Equally so is the bodily reaction from the mental and emotional condition thus produced. And as the topic is a somewhat lengthy one, a separate chapter will be devoted to its consideration.

CHAPTER VIII

THE MENTAL AND EMOTIONAL ASPECTS OF FUNCTIONAL NERVOUS DISORDER

When a person is sound in body and limb, and all the various parts of his nervous system are working together with consummate harmony and vigor, he finds no great difficulty in keeping his mind and, to a large extent, his emotions in perfect control.

Under these ideal conditions he faces his daily duties and responsibilities with the power to accomplish, and with his attention entirely free from all annoying distractions of bodily origin. Courage, will-power, optimism and altruism are his natural attributes. Compelled to make a decision, he does so unwaveringly and then pursues his chosen course without misgivings or undue fear of consequences. He is

never appalled by the magnitude of the task before him, and each new day finds him ready and eager to apply himself to whatever is to be done. In disposition he is sunny—he could not be otherwise—and when the sky is overcast he sees nothing of the clouds but their silver lining. Wherever he goes he radiates cheerfulness, and both in this way and by actual deeds he is an inspiration and a help to all with whom he comes in contact.

On the other hand, when discord and debility characterize the working of this same person's nervous system, the mental and emotional situation is a strikingly different one. Here his attention is mainly engrossed with the riot of function going on throughout his body, and this introspection together with the resultant emotional depression and the ever-present feeling of lassitude soon tends to alter his character, impair his memory, cripple his will-power and narrow the field of his social and vocational activities.

Often the sufferer is himself quick to appreciate the change in his character. The

memory of what he was stands out clearly in consciousness, and his new personality, by contrast, seems so utterly foreign to him that he chides himself harshly for permitting its existence. However, as the disorder progresses and messages of distress stream into consciousness from an ever-increasing number of bodily regions, self-censure gives place to self-pity, and an all-embracing fear holds absolute sway over the operations of the mind.

By the time this stage is reached the sufferer has become a consummate egotist. He has a deep-rooted conviction that nobody else in the wide world ever was or ever could be so afflicted. His numerous symptoms are to him of absorbing interest, and he drags them into the conversation on every possible occasion. With each rehearsal they grow in number and intensity, and his feeling of self-pity is correspondingly increased.

In the home he is certainly a most difficult person to get along with. He requires the attention of the entire household, and his shifting moods keep every-

body about him in a mingled state of anxious solicitude and resentment. He finds it hard, even from a muscular standpoint, to evolve a smile and except on very rare occasions, when he momentarily forgets himself, he never makes the attempt. Tears, however, are always close to his eyes, ready to flow on every possible occasion—with one exception: The view of his own household, reduced by him to weeping, leaves him with eyes as dry as parchement. This exception is particularly noteworthy because of the fact that in a work of fiction or on the stage, a pathetic incident, however hackneyed the description or crude the acting, dissolves him in tears.

Both at home and elsewhere he peers anxiously into every available mirror to see if his outward appearance betrays his inward torment. And no matter what the fact may be, the mirror seldom fails to convince him that he is pale and haggard. If the members of his family cannot see anything peculiar about his looks and venture to chide him ever so mildly for complaining, they are branded as unsympa-

thetic, irritable and generally unfit for human companionship. How absurd of them not to be able to see what the mirror plainly shows and what he is sure, from the way he is stared at wherever he goes, is obvious to every outsider he meets!

The fact is that if he chances to be well-nourished and to have good color, he really does get but scant sympathy at home. His lassitude is attributed to laziness, and his procrastinating habits—the natural outgrowth of his enfeebled will-power—are unsparingly condemned. Such treatment increases his irritability a hundred-fold, and it finally comes to the pass where, if any one happens to brush against the chair in which he is sitting, to drop something noisily or slam a door, he starts violently and upbraids the offender in no measured terms.

As already stated, the range of such a person's fears is boundless. To enumerate them all would be an endless task. Shakespeare says: "All the world's a stage—And all the men and women merely players." The present writer ventures to

add that the nervously-weak individual enacts his rôle in the drama of life in a state of perpetual stage-fright.

In the main his fears are of sickness and death. Some of them are active all the time, but reach their maximum intensity in certain localities and under certain conditions; while others are occasioned only by such localities and conditions and disappear with a shift of scene and circumstances.

Every disease in the category may be feared, and even its presence—actual or suspected—in others about him causes him great alarm and apprehension. This, however, does not result from any altruistic feeling, but from his dread of contamination and his fear that a too great demand will be made upon his attention, energies and sensibilities. Particularly is this the case where some member of his own family is thought to be stricken.

The most common and, at the same time, the most secretly nourished fear is that of insanity. The anguish occasioned by it is indescribable. This fear is caused in part

by the queer feelings in and about the head already described, in part by memory defects and, lastly, by the unwelcome presence of whimsical ideas and constantly recurring impulses to do things which the sufferer recognizes as entirely foreign to his normal self.

Next most common is the fear of heart disease, with its popularly supposed termination in sudden death. In certain cases, particularly in women, this fear keeps its victim more closely confined within the four walls of the home than many a felon is in jail. Happily, in most cases this extreme effect is not produced; nevertheless, the circle of the sufferer's activities is greatly narrowed, and his peace of mind constantly disturbed. He cannot or rather dares not lie upon the left side, and is much perturbed if there is any constriction from the clothing in the region of the heart. He will often go a long distance out of his way to avoid walking up a street that has a slight incline. This is done through fear of the "strain" upon the heart which he is convinced such a walk would entail.

And through the same fear he will not voluntarily hurry, even on level ground, lift or carry anything heavy or ride in a swiftly moving elevator. If he is forced to do any of these things, the fear of the consequences and not the actual performance causes the heart to beat furiously and the extremities to become weak and shaky.

The attempt to eat when the stomach and intestines are distended with gas often brings the fear of insanity and sudden death to a climax. If the family alone are present at this time, the sufferer is very apt to leave the table and retire to another room, where he paces the floor, tries to eructate the gas and anxiously consults the mirror. Should a guest be present, and the sufferer is constrained by politeness to remain at the table, his feelings and actions are almost indescribable. He is fidgety and distracted. One moment it seems to him that his self-control is upon the point of leaving him altogether and that he will do some manifestly crazy thing. The next he feels as if his vital activities

had ceased altogether and that he must inevitably sink lifeless to the floor. In this crisis he swallows with difficulty, fumbles the table utensils and, if the conversation is addressed to him, stammers an irrelevant reply.

If the climax of the fear happens to come when he is seated at a restaurant table, he invariably calls the waiter, settles his score with feverish haste and beats a retreat to the street, leaving what he has ordered practically untouched. Ten minutes later, the climax passed, he may be ready for a hearty meal, but the restaurant in which the unpleasant experience occurs is very apt to be forever after taboo.

Under the thrall of these specific fears he shudders at the sight of a hospital, an undertaker's shop, or a funeral, and a newspaper account of some one going insane or dying suddenly causes him intense anguish of mind and body.

Certain of the fears which arise only in definite localities are quite as specific. For example, the fear of an uncontrollable impulse to jump from a high place—such

as the roof or one of the upper windows of a hotel, or from the platform of the elevated railway. Another noteworthy example is the fear of fire. Both in his own home and in public buildings the victim of this fear is at once thrown into a panic by the faintest smell of smoke whose exact origin he does not know. At home he is unwilling to have even the tiniest fire burning in a grate unless he can be present to keep an eye upon it, and he never retires for the night without assuring himself that the range and furnace are in a perfectly safe condition. If he plans to spend some time at a hotel, he makes it his first duty, after being shown to his room, to acquaint himself thoroughly with the location of the nearest fire-escape. Examples of a similar sort might easily be multiplied.

Oftentimes the fears excited by certain localities and conditions are complex in their nature and difficult of analysis. In this category come the fear that assails the sufferer in the theater and absolutely annihilates his power of enjoyment; that which attacks him in church; when he is

in a crowd; in an open field or on a railway train. These fears are not altogether identical, and yet have many component elements in common. Frequently the dominant element is the fear of fainting and the scene that such a mishap would involve. This scene the sufferer, through his over-exalted powers of imagination, pictures to himself in minutest detail. In his mind's eye, he sees people crowding about him, thrown into utmost confusion by his plight; the uprushing ambulance with its driver urging on his horse and sounding his gong; and the casualty ward of the hospital with its bustling attendants. His other senses readily supply the remaining details of this picture, which may come to his mind even when he is sitting in the quiet atmosphere of the home and produce an anguish of mind and body fully equal to that experienced in the localities mentioned.

It would be an idle task to attempt a detailed description of all the situations—ludicrous, pathetic and semi-tragic—into which the victim of any or all of these fears

is betrayed. Suffice it to say that scarcely a day passes in which things, both animate and inanimate, fail to conspire to fan the flame of the most havoc-wrecking of such fears or to kindle them anew.

A detailed description of the devices ordinarily employed by the victim to conjure away his fears or to avert their consequences is equally impossible. To still the fear of contamination by disease he is constantly spraying his nose, gargling his throat, washing his hands or getting into his tub. To prevent "heart failure" he carries with him a vial of brandy or aromatic spirit of ammonia in a readily accessible pocket or satchel. And to accomplish, without absolute panic, a trip into some dreaded locality he must have with him some member of the family even though it be but a child. Curiously enough, he almost never makes use of the vial of stimulant when his fear reaches a climax, but tries to divert his mind by eructating, by chewing a bit of wood or by touching objects at definite intervals.

What with his fears, his constant feeling

of tire, his various disagreeable bodily sensations and the rest of his mental and physical discomforts, the victim of disordered nerves greets the beginning of each new day with anything but enthusiasm. On the contrary he bestirs himself languidly, as if oppressed by the weight of a nation. Even the most trivial of the routine tasks before him assumes mountainous proportions, and anything out of the ordinary seems to him impossible of accomplishment. His motto is: Never do to-day what you can avoid entirely or put off indefinitely. Consequently, to his detriment, financially and otherwise, he postpones important engagements and seldom forces himself to a decision in matters of moment. Particularly is this true of engagements at a distance. At the mere thought of their fulfilment he grows sick with apprehension; the actual fulfilment is downright agony. First come the terrors of the departure—the noise, bustle and confusion of the railway station. Then, with the journey actually begun, comes the realization that every turn of the wheels is tak-

ing him farther and farther away from the only place in which he feels at all comfortable—home. At this he tries to divert his mind by reading, but finds his attention divided. What if anything should happen to him in his present situation! This thought sets him quaking with dread, and he tries in a variety of ways, but with indifferent success, to banish it from his mind.

The severest strain upon his jangled nerves comes with the dinner hour. He feels suffocated the moment he enters the narrow confines of the dining-car and if he is forced to sit next to the window and ride backward, this feeling becomes so acute that he eats but little and retreats as quickly as possible to his own car, where even the little he has eaten seems to have turned to lead in his stomach.

At the end of his journey he is absolutely exhausted, and groans in spirit at the thought that his mission is yet to be accomplished. He wishes himself safely at home again, but pulls himself together as best he can to face the existing situation.

What he suffers in mind and body during his stay is more easily imagined than described. It is enough to say that he does not know a happy moment until he finds himself back again at his original starting point.

The difficulty experienced in coming to a decision in important matters has already been mentioned. In most cases this difficulty is not limited to such matters but extends to the most commonplace and trivial affairs of every-day life. And when, after numerous doubts and questionings and prolonged vacillation, a decision is reached, the sufferer finds little or no satisfaction in it, feeling certain that a different course should have been chosen.

This same individual's propensity for doubting is absolutely unbounded. He is never certain of anything except that he is the most afflicted of mortals. This doubting mania¹ leads to silly time- and energy-wasting activities, such as returning over and over again to make sure that a door has been properly closed and fastened, a

¹ The word is used in a strictly popular sense.

gas jet thoroughly turned off, a clock wound, and others too numerous to mention.

As far as he is able the sufferer avoids all social functions. Among his pet aversions are formal gatherings of all kinds, particularly dinners. And the anticipation of being in any way brought into the lime-light on such occasions drives him frantic. If, for example, he is expected to make a few remarks, he fidgets continually and is strongly tempted to beat an inglorious retreat before his turn to speak arrives. He generally refrains from this, but seeks relief in frequent noiseless eructations. This measure usually proves ineffectual, however, and his discomfort grows to such an extent that when he is at last called upon, he arises with trembling limbs, a heart beating to suffocation, and a voice of crow-like hoarseness. Once he is upon his feet, his ideas desert him absolutely and what he says is as different from what he originally planned to say as chalk is from cheese.

The experience just described very nat-

urally leaves the most disagreeable and discouraging sort of impression upon the mind, and, in many cases, where it has been several times repeated, it alone has served to spoil a career that gave every promise of brilliancy.

We now come to the consideration of the sufferer's nights. In many cases, the events of the day are a most unreliable presage of what the darkness will bring forth in the way of sleep. A night of complete wakefulness may follow a day of comparative tranquility, whereas a heavy sleep of seven or eight hours may bring to a close a day of unusual turmoil.

Generally speaking, the sufferer retires with his lower extremities uncomfortably cold. If the temperature of the room is at all low and a certain spot on the back of his neck is not thoroughly protected, he is cold all over. Until the warmth is completely restored to body and extremities, sleep is out of the question. This warming-up process may take an hour. Meantime the mind runs like a mill-race. The happenings of the day are gone over

again and again in minutest detail, and the probable sayings and doings of the morrow thoroughly rehearsed. Disagreeable bodily sensations—such as the pulse-beat in the ear and the rumbling of gas in the intestines—stream constantly into consciousness. The senses are keenly alert, and any unusual sight or sound is apt to set the heart acting in a fashion which suggests the antics of a squirrel in a cage.

Just as the individual is at last dozing off he may be rudely awakened by the spasmodic jerking of the legs already spoken of. This entails another period of wakefulness, usually brief, which is followed either by sleep or by a counterfeit presentment of this state. In this latter condition consciousness does not seem to be lost entirely. The individual fancies that he carries on conversations with familiars and that he performs the most complicated acts; and there is a vividness and a semblance of reality about it all that is never even approached in mere dream states. Sleep itself is frequently broken by dreams which are nearly always of a disagreeable,

even terrifying, order, and the victim is very apt to awake from them with rapidly beating heart, and with body and limbs quaking and bathed in perspiration.

If sleep chances to come shortly after the bed has been sought, it seldom extends beyond daybreak. From this time on the individual may tumble and toss about the bed, sit up in it and read or actually arise and pace the floor in desperation.

In certain cases a marked tendency toward a complete inversion of the natural order is shown. In these the sleep, which forsakes the individual at night, grips him with fiendish relentlessness in the daytime, with the result that he either drops into a sound slumber every time he sits down or else goes about for the most of the day in a semi-somnambulistic state.

Many claim that they do not get more than two or three hours' sleep out of the twenty-four, for weeks or even months at a time. This is most emphatically not so, but such people naturally get this notion because the sleep they do obtain is of the

character described and leaves them thoroughly exhausted in the morning.

The foregoing picture of the mental and emotional aspects of functional nervous disorder represents or attempts to represent conditions at their worst. The symptoms described are seldom present in their entirety in a given case, and those that chance to appear may not exhibit the degree of intensity ascribed to them. The author has, however, a threefold purpose in handling the subject as he does: (1) to show that Medical Science is thoroughly familiar with the nervously weak individual's every doubt, fear, vagary and crotchet; (2) to endeavor to disabuse the mind of this individual of the notion that his case is in any sense unique; and (3) to teach him how, with intelligent effort and perseverance, a cure may be effected, even if his plight happens to be in every way as bad as it has been pictured.

This last-named purpose now calls for fulfilment. The attempt has been made to demonstrate that the sufferer from

“nerves” is sick both in body and mind and that his physical and mental disorders act and react in such a way that a vicious cycle is established. To break this cycle no measures can possibly avail, which fail to give consideration to body and mind alike. This point established, those measures which make for physical betterment will, to preserve the sequence, be discussed first.

CHAPTER IX

THE PHYSICAL TREATMENT OF FUNCTIONAL NERVOUS DISORDER

Any victim of disordered nerves who has been thoroughly convinced by what precedes that all his physical sufferings spring primarily from a common origin—weakness and irritability of the motor, sensory and sympathetic elements of his nervous system—has already made considerable progress toward the goal of recovery. And the rest of the journey will, through this same conviction, seem very much less of a *via crucis*.

The essential nature of nervous energy, like that of electricity, is unknowable. This fact alone suffices to prove that there can be no royal road to its acquisition and conservation. Nevertheless, there is at hand a certain practical knowledge with

regard to it, which teaches us what we may best do to favor its production and prevent its waste. We know, for example, that it is, at least in part, evolved from forces latent in the substances taken into the system as nourishment. Hence, the nervously weak individual's first physical care should concern his diet.

Too much emphasis cannot be laid upon the fact that in a dietary designed to favor the production of nervous energy, there is absolutely no place for fads of any sort. The market is stocked with patented foods and near-foods of every conceivable kind. But in spite of the claims made for them, they are in no important respect superior to the unpatented sorts, and the sufferer—if he be wise—will spare himself much disappointment by making no experiments with them. All exclusive diets, notably the vegetarian, also come under the ban.

The need is for food that is generous in quantity, varied in character, and, above all, well cooked and well served. The last two requirements are made particularly emphatic because in many cases

both appetite and digestion are absolutely governed by the manner in which food is prepared and presented.

In certain cases the necessary generous diet is, at first, out of the question for the reason that, while the appetite is unimpaired, digestion and assimilation are so enfeebled that what is eaten cannot be taken care of; in others it is not feasible because of the complete lack of appetite itself, but by persistent effort and avoidance both these obstacles may be overcome.

In all cases a daily evacuation of the bowel is absolutely necessary. To establish this the use of some simple laxative may for a time be necessary, but the indiscriminate taking of purgatives is strongly to be condemned. As soon as possible the laxative should be abandoned and the bowel made to move of its own accord at a fixed hour, preferably just after breakfast, every day without fail. This regularity may be facilitated by drinking a single cup of hot coffee and by eating two or three thoroughly stewed but unsweet-

ened prunes with the morning meal. Scrupulous attention to the bowel brings two rewards: First, it does away with the constant "stuffed" feeling so commonly experienced and makes the taking of food a possibility; second, it prevents the irritation of the nervous system, with its accompanying waste of energy, which follows from absorption of poisonous matters from the waste products of digestion.

The individual with a good appetite but poor digestion and assimilation is the haggard, anxious, ill-nourished type spoken of in Chapter VII. He feels that he must, in order to keep up his strength, eat heartily whenever he goes to the table; with the result that he is in the throes of dyspepsia most of the time. Such a person should begin the training of his digestion by reducing materially the amount taken at the regular meals. Under such a course he will, at first, experience a feeling of faintness between the regular meal times, but this may be easily overcome by taking a raw egg or a scraped beef sandwich. The raw egg is an ideal article of diet for the

nervously-weak. It is easily digested and assimilated and contains a phosphorus compound (lecithin) similar to that found in nervous tissues.

Many individuals complain that they cannot take raw eggs, but in most cases the objections raised are of a purely esthetic order and not well founded. The trouble usually is that the egg is broken into an ordinary tumbler and has to slide four or five inches before it reaches the mouth. During this interval a nausea of purely mental origin is occasioned, which often renders swallowing impossible. This anticipatory disgust may easily be avoided if the egg is broken into a whiskey tumbler and a small pinch of salt added. Under these conditions the tumbler is no sooner to the lips than the egg is on its way down the throat, and the salt takes away all mawkish after-taste. It is a simple point but an important one.

If the above régime is conscientiously pursued, the individual soon discovers that his digestive troubles are on the wane and that he is gaining in flesh and strength.

In the course of time he finds that he can go comfortably from one regular meal-hour to the next without the extra nourishment, vary his dietary and add generously to the amount consumed at a single sitting without untoward results.

Where digestion and assimilation are not seriously below par, and appetite alone is lacking, the cause is usually mental in origin and relief must be sought in the psychotherapeutic measures which will be fully discussed in the next chapter.

In the generality of cases the nervously-weak are constitutionally unable, even under the most favorable conditions, to digest and assimilate most starchy foods, shell fish of all kinds (except oysters), raw fruits, nuts, cheese, certain sweets, baked beans and many other vegetables, such as turnips, carrots and radishes. But with all these forsworn, the dietary open is still sufficiently extensive to satisfy the need for variety.

Whether the victim of disordered nerves should indulge in the use of alcohol and tobacco is a question easily answered.

Most emphatically he should not. Alcohol is said by certain physiologic chemists of high standing to have a food value, but it should be remembered that what is food for one is poison for another. And for people with "nerves" the "food" in question is not only a poison, but a subtle and dangerous one. Many cannot take even the most trifling amount without immediately feeling light-headed, flushed and generally uncomfortable; and it is well for them they cannot. Many others find in alcohol a prompt, though temporary, relief from the distress of mind and body in which they pass their days. In such cases it seems to stimulate the appetite, aid in the expulsion of gas from the intestine, restore self-confidence, increase the power of endurance and promote sleep. But it must not for a moment be forgotten that such apparent benefits are never conferred without a price—often a terrible one. And he who accepts them is indeed lucky if the toll exacted does not leave him absolutely bankrupt in will-power and moral strength generally.

Tobacco should be shunned because, even when used in moderation, it increases the weakness and irritability of the sympathetic nervous system, and thus adds greatly to the severity of the circulatory and digestive symptoms already present. When used excessively it causes marked diminution of sight and hearing, twitching of the muscles about the eye, tremor of the hands and unsteadiness of the gait.

Many sufferers, guided by high moral principles, scorn to make use of alcohol, and yet indulge to the top of their bent in strong tea and coffee, ignorant of the fact that both these beverages are, for them, treacherous stimulants. It cannot be gainsaid that a steaming cup of well-made coffee, taken with the breakfast, helps materially to evacuate the bowel, but aside from this there is absolutely nothing to be said in its favor. Both tea and coffee act upon the nervous system very much as tobacco does and, except for the morning cup of coffee, their use should be sedulously avoided by any one who is en-

deavoring to regain and conserve nervous energy.

The practice of self-drugging, which is deplorably common among the nervously-weak, cannot be too strongly condemned. Recourse to the dangerous coal-tar products¹ for the relief of headache and sleeplessness should never be had—first, because such remedies cannot possibly remove the cause of the trouble; and, second, because their continued use weakens the action of the heart and introduces impurities into the blood, which act as a virulent poison upon the nervous system. Infinitely more dangerous, however, is the use of cocaine and morphine. And the individual who seeks Nirvana in these deadly drugs is bound, sooner or later, to find himself instead in an absolute hell of mental, moral and physical torment.

The matter of bathing comes next for consideration. Taken under proper conditions, the bath and the subsequent rub-down aid greatly in restoring tone to and

¹ Those most commonly resorted to are acetanilid, antipyrin, phenacetin, sulfonal and trional.

decreasing the irritability of the vaso-motor nerves of the skin blood vessels.

Through lack of proper understanding, the cold tub stands high in popular favor as a restorer of nervous energy, and many a victim of "nerves," on the advice of misguided friends, drags himself wearily from his bed morning after morning, summons all the courage at his command, goes through the ordeal of the cold plunge—and then spends the better part of the day trying to get warm. It is all a great mistake, as the following facts readily prove. In conditions of health the body temperature is 98.6 degrees.¹ In states of nervous exhaustion these figures are rarely reached; and in the early morning especially, when the vital forces seem to be at their lowest ebb, the heat of the body is generally a degree and a half below the normal. Under such circumstances the absurdity of bringing about a further lowering of the body heat and at the same time increasing the depletion of the vital energies, by the external application of

¹ Fahrenheit.

cold water, is at once apparent. Nor is this all. The blood which is driven from the skin vessels by the cold finds its way into the main channels of the circulation and throws an undesirable strain upon the muscles of the heart. Obviously, then, the cold bath is not for the nervous. For them the best results are obtained when the following conditions are observed: The bath should be taken the first thing on arising, but in a room with a temperature which feels comfortably warm to the naked body. The temperature of the water itself, to which a few handfuls of sea-salt may with benefit be added, should, at first, be only slightly lower than that of the room. During the entire bath, which should occupy about five minutes, friction of the skin should be maintained by means of a rubber sponge or a coarse mitten; and after the first two or three minutes the temperature of the water should be materially lowered by turning on the cold tap. After this sort of a bath the nerves which control the skin blood vessels are really invigorated, and a rub-down with

a Turkish towel of ample proportions brings a comfortable glow to the whole surface of the body.

Sea-bathing, under proper conditions, yields the same good results. Very cold water should be avoided, and the sufferer must under no circumstances take his bath when he is exhausted or chilly. Once the preparation for the bath is made there should be no standing about. The head-first plunge is best, and the non-swimmer should imitate this by first rubbing the face, neck and shoulders with the water, and then quickly immersing the body to the neck. At the beginning of the season the stay in the water should be very brief, and at no time should it be prolonged beyond fifteen minutes. The bather should be active all the time he is in the water and, so far as he is able, keep body and limbs constantly immersed. After the bath the wet bathing garments should be removed at once and a good rub-down taken. In this way all dangerous chilling and all strain on the heart are avoided, and the individual feels generally refreshed and invigorated.

Several other forms of baths, including the Turkish, the electric-light and the so-called magnetic are often highly recommended for the nervous. As a plain matter of fact, certain of them—notably the magnetic—are pure humbug, while the beneficial effects of the rest are more than doubtful.

We come now, finally, to two matters of vital importance—exercise and rest. In the writings of certain authors the impression is given that, in states of nervous exhaustion, the physical fatigue experienced is mainly of mental origin and can be overcome largely by will-power. This point of view is, as shown in Chapter VII., by no means to be relied upon; and the literal acceptance of it by the sufferer is bound to lead him into the dissipation of precious energies he can ill afford to lose. The physiologic fact that every muscular movement, however slight, means a certain output of nervous force is, in itself, enough to show that an individual with a slender fund of vitality should carefully regulate his physical activities.

The commonest advice given to people who are so exhausted nervously that they can hardly drag themselves about, is to take more exercise. This suggestion makes a strong appeal to the unwary, who immediately purchase a "home exerciser" of some sort, join a gymnasium or start upon a course of physical culture prescribed by a correspondence school. At the outset their enthusiasm is unbounded. The chosen exercise is faithfully performed, and the hope of rivaling Sandow runs high. In the great majority of cases, however, the result falls far short of the expectation, the initial fund of enthusiasm soon dwindles to the vanishing point and the project of acquiring herculean strength is finally abandoned in disgust.

It should be a comfort for the reader with "nerves" to know that the upbuilding of a huge muscular system is by no means necessary for the recovery of his health. A certain amount of exercise is, however, indispensable, and, when possible, it should be taken in the open air—preferably in the pursuit of one or more

of the well-known forms of out-door sports.

In cases where the indulgence in such sports is impracticable, a daily walk of two or three miles, if taken under proper conditions, makes an excellent substitute. To get the maximum of benefit from it the individual must always have some definite goal in mind before he starts, for there is nothing more irksome than to go wandering about, with no other object than to cover a certain amount of ground.

The clothing worn on these walks should be appropriate to the prevailing weather conditions, and so fashioned that the freest possible motion is allowed to both legs and arms. The head should always be protected. Emphasis is laid upon this point because of the widespread delusion among both sexes that there is benefit to be derived from going bare-headed and, in the case of women, also more or less bare-chested in all seasons. Out of this silly practice no good can possibly come. On the contrary, it is fraught with danger. It brings about undesirable changes in the texture, color and vitality of the

hair, and in summer exposes to sunstroke. In winter it leads to severe and persistent neuralgias of the face and neck and, in not a few cases, to bronchial colds and actual pneumonia.

To prevent monotony the goal of the daily tramp should be frequently varied. This can be easily accomplished during the greater part of the year if the sufferer, in his intense egotism, has not become entirely oblivious to the wonderful things in nature. Excellent books on birds, trees and wild flowers, written in simple language, are to-day within reach of everybody, and in the immediate environs of every community ample opportunity is afforded for putting to practical test the knowledge gained from these sources.

For the individual who is wise enough to adopt this nature-study suggestion, the best plan is to ride to and from the haunt of bird or wild flower and to do the actual walking in the search for specimens. In all cases frequent short rests should be taken and the habit of deep breathing practised.

To many sufferers a single walk of two or three miles, even when taken under the above favorable conditions, may, at first, prove too exhausting. Where this is the case, a mile or a mile and a half can generally be covered with comfort in the morning, and the same distance in the afternoon, provided that a good rest has been secured in the interim.

The best out-door sports are those that need involve no strain of competition. At the head of the list comes golf, which, in many localities, can be played nearly the whole year round. Others strongly to be recommended are rowing, canoeing, small boat sailing, skating, snowshoeing and tobogganing. Even the effeminate game of croquet will, in many cases, prove to be of great service.

The benefit derived from the pursuit of nature-studies and outdoor sports is inestimable, and by far the greatest part of it comes not from the physical exercise, but from the sunshine, the fresh air, and, above all, the complete change which, for the time being at least, is effected in

the working of the mind. Through study and sport the faculties are constantly brought to bear upon outside matters in a lively and absorbing way, and while they are thus engaged deadly introspection and self-analysis cease.

If the proper clothing is adopted, the weather is seldom sufficiently inclement to preclude all forms of exercise in the open. And even when it is, both exercise and fresh air may still be secured several times a day by taking deep breaths and by going through the simplest calisthenics in a thoroughly ventilated room.

For the end of the chapter is reserved the all-important topic of physical repose. Elsewhere it has been shown that, owing to disordered sleep, the night's rest is seldom satisfactory, either in character or amount, and that the sufferer often rises in the morning feeling more wearied, both in body and mind, than he did on retiring. So long as this unfortunate state of affairs persists in a given case, the need of rest in the daytime is imperative; and if the physical fatigue is at all marked, the

time spent in resting should far exceed that devoted to exercise.

Many sufferers who have fallen into the habit of waking at daybreak are puzzled to know whether they should rise and dress at this time or, as they often express it, "lie turning and tossing in bed, with the mind going like a mill-race." If the individual thus afflicted will take the trouble to analyze the situation, he will find that the main cause of his restlessness and general uneasiness is a feeling of anger and resentment at his inability to sleep. Now, it cannot be too strongly impressed upon such a person that inability to sleep at this time by no means carries with it the inability to rest; and the best course for him to pursue is this: If there is any sense of fulness whatsoever in the bladder, the urine should be voided *at once*. This done, the bed should be immediately sought again, the attitude of sleep assumed and the mind concentrated upon the thought that rest is being secured even if sleep is not. Through the faithful pursuit of this simple procedure

not only the much-needed rest, but also the unhopèd-for sleep is, in many cases, secured.

Physical rest should always be taken in the recumbent position. During the late spring, summer and early autumn it is best taken outdoors, and great care should be observed to guard the entire body against chill.

The hour or, better still, the hour and a half immediately preceding the noonday and evening meals is the ideal time for the rest, and throughout this entire period the utmost relaxation of body and mind should be maintained. This is, at first, no easy task, owing to the muscular tension and self-absorption which go hand in hand with the disorder. But by persistent endeavor the morbid activities of the mind can, for the time being, be checked, the muscular tension abated and energy dissipation transformed into energy accumulation.

Many a sufferer, on the advice of misguided friends or of a physician who lacks a true understanding of the case, repairs

to some "quiet country village" or starts off on a long voyage over seas in search of rest and strength, at a time when his nervous energies are at their very lowest ebb. No greater mistake could possibly be made. Foreign travel may prove a splendid thing for him who is nearing the completion of his cure, but before that happy time it promises nothing but an increase of physical fatigue and a variation of the infinite worries and vexations he is trying so sedulously to escape. A sojourn within the unspeakably dull confines of an isolated country village is, in the main, open to the same objections and should be unhesitatingly avoided.

If the sufferer has *intelligently* sympathetic relatives and friends about him, and is in a position to carry out fully and faithfully the suggestions laid down in this chapter concerning diet, the care of the bowels, bathing, exercise, rest and so forth, the best health resort for him is his own good home.

Even a brief trial of this treatment will bring its reward in the form of an in-

creased feeling of physical well-being; and its continued use, in conjunction with the psychotherapy advocated in the next and final chapter, is bound, in the end, to effect a complete restoration of nervous health.

CHAPTER X

THE PSYCHOTHERAPY OF FUNCTIONAL NERVOUS DISORDER

Every victim of "nerves" is fated to be the target of much ill-advised raillery from his family and friends—and even from physicians; but of all the unkind things said to him, none hurts and discourages him quite so much as the insinuation that he does not try to control his thoughts and emotions.

This insinuation does him the greatest injustice. In the majority of cases the struggle for the mastery of the emotions is practically constant. That it is so often fruitless is due to the fact that it is waged with exhausting strenuousness and without the requisite self-understanding—consequently without method.

Throughout these pages every effort has

been made to enable the sufferer to acquire the much-needed knowledge of self, and if he has applied himself to the task with the zeal and persistence that many people exhibit in the search for this same knowledge in the literature (?) of Christian Science, he has surely found what medical men of understanding and experience the world over agree to be the truth; whereas in Mary Baker Eddy's superfluous "Key" to the ever-open Thesaurus of Christ's healing words, the seeker finds not truth, but the stimulus to self-stultification—a practice which reflects but little credit upon human intelligence.

With this truth clearly before him, the sufferer is at once able to free himself from the worry and anxiety that are born of ignorance. Through it he knows that the unwelcome ideas, which force their way into his mind and seek to impel him to acts condemned by reason and the moral sense alike, most emphatically do not mean insanity; that numbness is not the forerunner of "paralysis" or a "stroke"; and that irregularity in the action of the heart,

stomach, intestines, kidneys, bladder and other organs is the result of depleted nervous force and not of a "complication of diseases." He knows, in a word, that purely functional disorder, and not organic decay, is responsible for all his misery. And this knowledge will hearten him to practise with greater zeal the psychotherapy—self-discipline—necessary for the casting out of the more deeply-rooted morbid ideas and emotions which, through their bodily reaction, keep up the drain upon his nervous vitality and so prevent recovery.

In view of the complexity of human nature, it is not to be expected that the self-knowledge imparted by medical science will be all-sufficient for the acquisition of self-mastery in every case. Many sufferers feel the need of divine assistance in their struggle—hence are easily lured by the specious promise of such aid given by neo-theologic cults, whose leaders have the effrontery to pose as inspired vicars of Christ.

To shield them from this lure, the au-

thor hastens to assure them that medical science is not the godless thing it is too often thought to be. The marvelous intricacy with which the human brain is constructed is sufficient, in itself, to prove that the workmanship is divine; and every right-minded physician will readily agree that there are crises of mental agony which the sufferer's religious faith, if it be deep and sane, can do more to allay than all the resources of "materia medica."

This religious faith is, however, not the brand that so often finds expression in mere lip-service. It is as naïf and boundless as that which a little child reposes in its earthly parents. It is, moreover, not born of theologic sophistry and casuistry; in fact, it is not the outcome of any sort of reasoning. On the contrary, it is the sublimation of one of the deepest feelings of which the human soul is capable—the belief that the heavenly Father, with His infinite love, pity and power, is ever present and ever ready to succor even the most erring of His children in their distress.

With such a faith comes the readiness to believe that the torture of "nerves" is not a divine punishment for youthful indiscretions or for certain practices commonly employed by the married for defrauding Nature. The opposite belief is widespread and causes a torment of mind, which is rarely relieved by the knowledge that while vapors ("nerves") have marked many of the most saintly lives, they have seldom been the lot of the most notorious libertines and courtezans of history.

Through this same sturdy faith comes also the courage to do battle with and master morbid impulses, and to put to rout the whole nerve-robbing horde of fears that daily assail the sufferer in certain localities and under certain circumstances. But greatest of all the blessings that spring from it is the power to will.

We are very apt to think of Will as something distinct from the feeling or feelings, which, momentarily, prevail over others; whereas, in reality, it is nothing but the general name given to the special

feeling that gains supremacy and determines action. Take away all sensations and emotions, and there remains no Will. Excite some of these, and Will, becoming possible, becomes actual only when one of them, or a group of them, gains supremacy.¹

Now, in the nervously-weak person, the feelings which are ordinarily in the ascendancy and thereby constitute his personality or Will are of such a nature as to cripple *useful* activity. He may endeavor to argue them away—in fact, he does so endeavor; but generally in vain.

Argument is, of itself, inadequate to restrain these unwelcome emotions and turn the tide in favor of a weaker group, which is struggling to attain supremacy and thus make useful activity possible. In such a juncture what is needed to make Will *actual* (note the word) is the aid of an emotion more powerful than the combined forces of those already aroused. And this aid is abundantly bestowed by that deep, soul-born emotion which *is* religious faith.

¹ See Spencer's *Principles of Psychology—The Will*.

With sustaining faith and self-knowledge, the sufferer is in a position to introduce method into the fight for self-mastery. He is not called upon by any rational system of psychotherapy to deny the materiality of disease or to refuse the evidence of his senses, but he must force his mind into channels of activity, which create a pleasant reaction in consciousness and divert attention from the disagreeable sensations that spring from perverted nervous function.

A method of securing this salutary mental diversion during the time devoted to physical exercise or to rest has already been described. But even with these hours provided for, there is still enough left of the waking day to afford ample opportunity to indulge in the pernicious habit of introspection, self-analysis and self-pity.

To make this indulgence impossible, nothing serves better than some occupation which requires the use of the hands, as well as of the mind. And wood-carving, weaving, book-binding, brass-work

and pottery are all admirable for the purpose. These occupations make no undesirable demand upon the sufferer's slender stock of nervous energy. On the contrary they tend, either directly or indirectly, to conserve it by gripping his attention, cultivating his esthetic sense, bringing into play his coördinating faculties and stimulating his interest in creative work.

There are still other fads, some of which lead to creative industry, while others do not, but which are all of distinct psychotherapeutic value. Notable among them are the making of collections of all kinds, and the study of languages, painting, music and the different weaves of Oriental rugs.

The tendency of the eyes to tire and blur, on being used for any considerable length of time, is seldom an indication that glasses are needed. If a refractive error is present, it should, of course, be corrected at once by a competent oculist; but too many people have recourse to glasses for the relief of eye trouble, which is merely a symptom of nervous exhaustion

and disappears when the vital forces are restored. While this symptom is present, however, protracted use of the eyes should be avoided, and directly the sufferer feels them growing weary, he should rest them by turning to some occupation in which manual activity is mainly required.

Pessimistic literature of all kinds, particularly the "Sex and Soul" variety, should be absolutely eschewed. And the same interdiction applies to scientific treatises upon diseases of the nervous system. For intelligent comprehension of the latter a thorough medical education, combined with experience, is necessary. Without this, the reader with "nerves" is very apt to reach the comforting conviction that his own case presents the principal features of every nervous and mental disease in the category.

For serious reading, the works of frankly optimistic philosophers are best; and as misery loves company, it should be both a comfort and an inspiration to the sufferer to know that much of the doctrine of good cheer that has stood the test of

time, was not evolved by men whose minds were care-free and who never knew the pangs of physical suffering. On the contrary it has come down to us from men who were often sore pressed for lack of the ordinary material comforts which surround even the most humbly situated of moderns; who were, from personal experience, thoroughly familiar with the physical rack and mental torment of disease, yet were imbued with the belief that there is compensation in all things and maintained a sane and cheerful outlook upon life.

There are, for example, many words of comfort for the nervous in the philosophy of Epictetus, and if the sufferer cannot or does not care to go to the original sources for them, he will find them, together with much other helpful matter, in the works of certain present-day writers.¹

¹I cordially commend to the reader's attention two particularly encouraging little volumes—*Why Worry?* and *Those Nerves*—from the pen of my friend and colleague, Dr. G. L. Walton. I also urge the study of a noble and inspiring book, which appeared more than a quarter of a century ago—*The Intellectual Life*, by Philip Gilbert Hamerton.

It is especially desirable that the risibilities of the nerve-racked should be excited as frequently as possible. To this end there is such a wealth of wholesome wit, both in ancient and modern literature, that an enumeration of authors is entirely out of the question. In every library access is made easy to books which are filled with the whole-souled laughter of men who have consistently refused to be depressed by the tragedy of life; and he who will not permit their genial mirth to trickle into his soul, neglects one of the most powerful psychotherapeutic aids within his reach.

Of the same easy access are biographies of the great generals and commanders of history, and they are splendid reading for the individual who is afflicted with timidity born of "nerves." They teach him that courage is neither hereditary nor peculiar to any particular habit of body, but that it is the product of self-training and may be acquired even by those whom Nature has treated most shabbily with respect to their physical make-up. Books of this sort are, moreover, a revelation, in

that they show that the courage which secured for men the most enduring fame did not spring from devil-may-care recklessness, but, on the contrary, was inspired by that simple and fervent religious faith which enables its possessor to will.

From the energy-wasting habits, which the foregoing measures are designed to thwart, spring others, both of thought and action, which are quite as pernicious, and whose suppression—by sheer force of Will—must constitute one of the earliest victories of the fight for self-mastery.

The sufferer must stop looking at himself in every mirror or other reflecting surface that comes in his path. He must abandon the utterly foolish notion that strangers in public conveyances and elsewhere look at him solicitously or in any other way that betrays the slightest thought of his sorry plight. And he must refrain from writing down his symptoms and rehearsing them on every possible occasion.

It may come hard for him, with his exalted egotism, to realize it, but the stern

fact remains that instead of being the target of everybody's gaze, as he believes, he is even less so than the groom is at a church wedding. And if this comparison does not give him pause in his silly belief, nothing under heaven can.

The "mirror habit" and the recording and telling of symptoms keep alive the parent habit of self-pity, which is best dead. Self-forgetfulness is the goal toward which every sufferer, who is sincerely anxious to get well, must resolutely set his face, and self-pity is one of the greatest obstacles to its attainment.

The excuse often given for the symptom-writing habit is that the memory is quite unreliable, and that unless a complete record of his woes is kept, the sufferer cannot make his situation properly understood. The last half of this excuse is entirely invalid and, through the adoption of the proper curative methods, the first becomes equally so.

Memory is the fixation in consciousness of impressions received through the medium of Attention. In the case of the

nervous, Attention is so engrossed with disordered bodily sensations of all kinds that it finds little or no opportunity to focus on anything else—hence the lack of Memory for outside happenings.

With regard to the failure to remember certain symptoms, the explanation is equally simple. It is due to the fact that Attention is assailed by so many morbid sensations in such rapid succession, that only the most powerful of them are able to hold it long enough to make that lasting impression which constitutes Memory.

No sufferer need fear that his power to remember may be permanently impaired. Through the physical and psychotherapeutic measures already suggested, Attention will finally be enabled to busy itself in a normal fashion and, as a natural consequence, Memory will become dependable.

To any one unfamiliar with psychology, it may seem absurd to speak of dress as an important psychotherapeutic measure, but it nevertheless is. Some philosopher, in a moment of cynicism, has said that people

often find in good clothes a consolation that religion cannot give. This may or may not be so, but the fact remains that neatness of attire conduces strongly to a proper feeling of self-respect, and without the latter no struggle for self-mastery can possibly be successful. Hence a lively interest in the personal appearance should never for a moment be allowed to flag.

One of the hardest, and at the same time, the most salutary tasks the sufferer must accomplish, is the demolition of the barriers his anti-social tendencies have caused him to set up between himself and the actualities of every-day life.

Daily attrition with one's fellow men is absolutely indispensable in every successful struggle to divert the activities of the mind into healthful channels. It is, therefore, imperative that the individual with "nerves" should come out of his more or less self-imposed isolation and begin to rub elbows with the world, at the earliest possible moment.

It is always safe for him to do so when he has reached that point in the convales-

cence where purely physical exertion no longer creates a sense of fatigue out of all proportion to the muscular output involved. Fatigue which is born of the thought or, rather, of the emotion aroused by the thought of doing something, is never a legitimate excuse for inactivity, since it invariably disappears with the performance of a given task.

Experience teaches that, in the struggle for nervous health, much can be accomplished by discriminate avoidance as well as by sustained effort. And the sufferer should have this fact prominently in mind when he attempts to resume his accustomed vocation. If he does not, the chances are that he will immediately use up all his accumulated nervous energy in one grand orgy of work, and find himself as badly off as ever. If, on the other hand, he is wise, he will shorten his working day and turn over to understudies all tasks which involve the petty, worry-creating details that have served to bring him low.

With a shortened working day, he will

find time for the needed exercise in the open, for physical rest and for the indulgence in some hobby which will take his mind off the affairs of the day and bring him to the dinner-table with an appetite upon which good digestion waits. The chances are, also, that he will be able to retain some measure of the good nature and affability of manner, without which he could not do business, but with which he ordinarily dispenses when he is in the bosom of his family.

With a still further increase in his physical strength, he is in a position to discharge, at least in part, the long-accumulating debt he owes to Society. The complete self-knowledge he now possesses leaves him no excuse for believing that direful consequences will overtake him if he ventures forth of an evening to the house of a friend, to the theater or to any other place of amusement. To be sure, on his first few sallies, his heart will probably pound like a trip-hammer, the gas will gurgle and rumble in his stomach and intestines, his legs will feel as though

they were made of cotton batting and he will look as radiantly happy as a man whose wife has just presented him with triplets. But he won't die; he won't even faint; in fact, he won't enact the star rôle in a tragic scene of any description. He may come home "all tired out" and toss restlessly about for a time after he goes to bed. Even so, there is no particular harm in that, no cause for discouragement and no excuse for a craven surrender of the struggle. With further effort the sought-for pleasure will be found, and the joy of participation will soon obliterate all painful memory of the quest.

With regard to the mental torture which is so frequently occasioned by functional disturbance of the reproductive organs, the author can only say that it is pathetically needless. With the return of nervous health, sufferers of both sexes may confidently expect to see all trouble of this nature disappear entirely. While it exists, however, everything which tends to excite the passions should be assiduously

avoided and sexual congress rarely attempted.

The time has now come to remind sufferers that the lending of a helping hand to others who are similarly afflicted is one of the most splendid and powerful aids to self-discipline imaginable. There are in every large community hundreds of nervously-exhausted individuals into whose hands books like this never come; and even if they did, they would mean absolutely nothing to them. These are the people—wretched mothers of numerous broods, gaunt seamstresses, ill-favored specimens of both sexes from sweatshop and factory, shabby gentlefolk and a heterogeneous collection of human flotsam and jetsam—who rub elbows in the ante-rooms of clinics for nervous diseases, patiently waiting for—what? A word of encouragement, instruction in diet and hygiene which, under existing circumstances, they are hopelessly unable to follow, and a prescription for medicine whose purchase often involves the expenditure of a whole day's earnings.

To such as these is directed the attention of every reader whose ambition is, in the words of Pope, "to endow a college or a cat." Of liberally endowed colleges we have at present a plenty, and philanthropic activity in other directions is by no means sluggish. The tuberculous, for example, are to-day solicitously cared for, and ample hospital provision is made for the cancerous, the crippled, the ruptured, the deaf, the blind and the insane; while those who are poor in pocket and nervous force alike, so long as they are able to exert themselves sufficiently to keep body and soul together, are, for the most part, allowed to shift for themselves.

The problem of proper care for these unspeakably afflicted people is a perfectly simple one. Their needs are understood in minutest detail by the experienced and devoted men who give unsparingly, and without thought of remuneration, both time and precious nervous energy to the conduct of the hospital clinics they frequent. And in every such clinic throughout the land there would be cordially wel-

comed coöperation in procuring for its charges not drugs to still the outcry of overwrought nerves, but the healing rest without worry, the good food and the hygienic environment that are so sorely needed. Here is unlimited opportunity for Service that will help enormously in the struggle for self-forgetfulness; and it should unhesitatingly be turned to account, particularly by those who, amid luxurious surroundings, indulge inordinately in self-pity and exhibit an unremitting resentfulness at what they are pleased to term the "harshness" of Fate.

After a well-spent day the sufferer is certainly entitled to a good night's rest. To actually secure it, however, he must, in the great majority of cases, make certain efforts and observe certain avoidances. It may be stated, as a general rule, that every hour of sleep obtained in the daytime leaves just so much less for the night. Daytime naps should, therefore, not be taken. During the hour which immediately precedes the going to bed at night, the mind should be occupied with some

subject entirely foreign to the important matters of the working day, and one which in no way involves the solving of any sort of a problem.

Out-of-door sleeping is, in most cases, impracticable for obvious reasons, but the bedroom should be cool and airy, the bed not too soft and the coverings light but warm. The bedside tabouret, with its reading-lamp, books, watch, drinking-water and bowl of crackers, is in itself a strong suggestion of wakefulness and should be excluded.

If the feet are cold, and they generally are, a warm foot-bath, taken just before the bed is sought, will serve both to draw the blood to the extremities and to lessen undesirable brain activity. This activity may be still further reduced by the taking at this time of a cup of hot malted milk or bouillon.

Once the sufferer is settled in bed, light and sound should, as far as possible, be excluded from the room. We will assume that it is ten or, at the latest, ten-thirty o'clock, for nobody with "nerves" should

be about after that time, unless convalescence is well advanced. In any case, it is no time for debating as to whether sleep will or will not come. The proper mental attitude is one of complete indifference with regard to this issue. It goes without saying that there should be no voluntary mental activity of any sort. If disturbing thoughts obtrude themselves, they must be sidetracked at once; and to this end there is nothing so effectual as spiritual communion. Formulated prayer may be out of the question, but deep down in his heart every sufferer, who is privileged to lie in a comfortable bed, under a roof which also shelters devoted kinfolk or friends, must recognize that he is, by the grace of some Higher Power, favored above the poor wretch who deems himself fortunate to be taken under the wing of Charity. The present moment is therefore a most favorable one for the cultivation of a combined feeling of gratitude and resignation, and if the sufferer devotes himself to this duty, as he clearly should, he will soon be rewarded in a twofold

manner—his peace of mind will be restored and his eyes will close in sleep. If there is a tendency to wake at dawn, it should be combated by the measures already suggested.

The great question with every sufferer is: "How long must I struggle before I may hope to see my efforts crowned with enduring success?" This query the author, not knowing the individual circumstances, cannot answer to the entire satisfaction of everybody. In a general way, he can say, however, that the natural tendency is always toward recovery, and that, in the majority of cases, the struggle is not long sustained before an encouraging glimpse of the goal is caught. It is usually a fleeting one, to be sure, and it is generally succeeded by a long period of gloom, in which there is absolutely no apparent progress, and all effort seems useless.

In a juncture like this, and there may be many such in a given case, there is but one proper course to pursue. The sufferer must gird his loins anew, summon to

his aid the strength that is his through virtue of faith and self-knowledge, and struggle unquestioningly on, bearing this in mind—that often when the gloom seems blackest and courage is all but dead, there comes a swift change, the gloom lifts and the goal stands out clearly within easy reach.

For the very end the author reserves a bit of philosophy that should be taken closely to heart by all who look upon “nerves” as an absolutely unmixed evil. They who do so forget that, out of evil, good often comes; and such is most emphatically the case with regard to the one in question. In many instances “nerves” exert a tremendous spiritualizing force and bring to a timely termination a long-existing process of soul starvation. For this great good out of evil the beneficiary has the most cause to be profoundly grateful, but his debt of gratitude by no means ends here. Without the fads which his illness has led him to cultivate, he would, in all likelihood, have entered upon the “lean and slippered” age absolutely with-

out mental resources of any kind. For his escape from such a fate, he who has passed through the ordeal of "nerves" should never cease to

"...thank the Eternal Power; convinced
That Heaven but tries our virtue by affliction,—
That oft the cloud which wraps the present hour
Serves but to brighten all our future days."¹

¹ *Barbarossa*, Act V., Scene 3, by John Brown.

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